

**2021-2022 FIRST RECONCILIATION/FIRST COMMUNION REGISTRATION  
FORMA DE REGISTRO PARA PRIMA COMUNIÓN/RECONCILIATION**

*Please Print / Favor de usar letra de molde.*

Date/Fecha: \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ Grade Level \_\_\_\_\_  
Nombre del (la) Joven \_\_\_\_\_ Grado \_\_\_\_\_

DATE OF BIRTH (M/D/Y) \_\_\_\_\_ CITY AND STATE OF BIRTH \_\_\_\_\_  
Fecha de Nacimiento (m/d/a) \_\_\_\_\_ Ciudad y Estado de Nacimiento \_\_\_\_\_

BAPTISM DATE (M/D/Y) \_\_\_\_\_ CHURCH NAME \_\_\_\_\_  
Fecha de Bautismo (m/d/a) \_\_\_\_\_ Nombre de la Iglesia \_\_\_\_\_  
City of Baptism \_\_\_\_\_  
Ciudad de Bautismo \_\_\_\_\_

Father's Name \_\_\_\_\_  
Nombre del Papá: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_  
Domicilio: \_\_\_\_\_ Ciudad: \_\_\_\_\_ Código Postal: \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Teléfono: \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_  
Nombre y apellido de la Mamá \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_  
Domicilio: \_\_\_\_\_ Ciudad: \_\_\_\_\_ Código Postal: \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Teléfono: \_\_\_\_\_

Church you regularly attend or are registered at \_\_\_\_\_  
Iglesia a la que asiste regularmente o en la que está registrado: \_\_\_\_\_

Was your child baptized at Sacred Heart Church? Yes/Si \_\_\_\_\_ No \_\_\_\_\_  
Fue su hijo bautizado en la Iglesia del Sagrado Corazon

If your child was baptized elsewhere, the Baptism Certificate is required BEFORE October 16, 2021  
Si su hijo/hija fue bautizado en otra parroquia, necesitamos su Certificado de Bautizo antes del día 9 de Febrero del 2022

What parish religious program did your child participate in last?  
En que parroquia estudio Doctrina su hijo/a el año pasado?

Church \_\_\_\_\_ City, State \_\_\_\_\_  
Iglesia \_\_\_\_\_ Ciudad, Estado \_\_\_\_\_

The Diocese requires 2 adults per class. As Catholics we are a people of service so all parents will be scheduled to assist in your child's class or provide other comparable assistance as arranged by the Pastor & CRE Mary Stallard. You are responsible to provide a substitute from the contact list provided if unable to fulfill this obligation. All Adult Helpers are required to complete Archdiocese Child Abuse Training.

Yes/Si \_\_\_\_\_ NO \_\_\_\_\_

Fees are \$40 for one, \$50 for two, \$60 for more than two children.

**For Office Use Only**

Paid Books \_\_\_\_\_ Paid Religious Ed. \_\_\_\_\_ Attend Sacred Heart School \_\_\_\_\_  
Baptismal Cert. \_\_\_\_\_ Baptized SHCC \_\_\_\_\_ Parental Meetings \_\_\_\_\_  
Prayers: Sign of the Cross \_\_\_\_\_ Hail Mary \_\_\_\_\_