**2021-2022 ST. AUGUSTINE PARISH**

**RECONCILIATION/FIRST EUCHARIST REGISTRATION – DEADLINE- DEC. 15, 2021**

**Please Print Clearly**

**FULL NAME OF CHILD:**

**SCHOOL:**

**GRADE:**

**MOTHER’S FULL NAME:**

**FATHER’S FULL NAME:**

**ADDRESS AND POSTAL CODE:**

**EMAIL ADDRESS:**

**PHONE NUMBER: (HOME) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (CELL) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PARISH OF BAPTISM:**

**DATE OF BAPTISM:**

|  |  |  |
| --- | --- | --- |
|  | **PLEASE ATTACH A COPY OF YOUR BAPTISMAL CERTIFICATE TO THIS FORM** |  |
| **AND RETURN IT TO THE SACRAMENTAL COORDINATOR: sacraments@staugustineottawa.ca.**  |