

First Holy Communion Registration Form



Please complete and return this form to the parish

(PLEASE PRINT)

Parish Information							
Name of Pari	ish: St. Anne's Ch	City: Peterborough, Ontario					
 I currently live within the territorial boundaries of St. Anne's Parish I currently do not live within the territorial boundaries of St. Anne's Parish 							
Child's Information							
Child (Full legal name):							
First Name		Middle Name	Last Name				
🗆 Male	Female	Date of Birth:	City of Birth:				
Church of Baptism:			Date of Baptism:				
Address of Baptismal Church:							

Parents' Information						
Mother (Full legal & maiden n	ame):					
First Name	Middle Name		Last Name	Maiden Name		
Religion: 🗌 Roman Catholic	□ Other:		🗆 None			
Present Address:						
	Street	City	F	Postal Code		
Phone:	_ Email:					
\Box I am a parent of, or have le	gal custody of the chi	ld.				

Parents' Information cont'd								
Father (Full legal name):								
First Name	Middle Name	Last Name						
Religion: 🗌 Roman Catholic 🛛 Other: 🔲 None								
Present Address: Same as mother's address								
Street	City	Postal Code						
Phone:	Email:							
\Box I am a parent of, or have legal custody of the child.								
Declaration								
I, the undersigned, declare that the information on this form (Pages 1-3) is true and accurate.								
Name (PLEASE PRINT):								

Date: ____

Signature: