



## Sacramental Initiation Process

### 1<sup>st</sup> Communion Registration Form 2015-2016

PARISH:

Our Lady of Perpetual Help, Labrador City

Our Lady of the Assumption, Wabush

### NAME OF CANDIDATE:

\_\_\_\_\_

First

\_\_\_\_\_

Middle

\_\_\_\_\_

Last

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Parish of Baptism: \_\_\_\_\_

City/Town of that Parish: \_\_\_\_\_ Province: \_\_\_\_\_

***Please Note:*** A copy of the Baptism certificate is required if your child was baptized in a parish other than Labrador City or Wabush.

### MEDICAL INFORMATION:

Any Allergies? \_\_\_\_\_

Any Medical Concerns? \_\_\_\_\_

### CANDIDATE'S PARENTS:

Father's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address (if different): \_\_\_\_\_

Religious Denomination: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address (if different): \_\_\_\_\_

Religious Denomination: \_\_\_\_\_ E-mail: \_\_\_\_\_

Candidates E-mail (if applicable): \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

For Office Use Only: \$ Fee Paid \_\_\_\_\_ Baptismal Certificated Attached/Located: \_\_\_\_\_