

# First Reconciliation and/or First Eucharist Registration

Please indicate which sacrament (s) your child is registering for.

- ◆ SACRAMENT OF FIRST RECONCILIATION
- ◆ SACRAMENT OF FIRST EUCHARIST
- ◆ BOTH OF THESE SACRAMENTS

**COMPLETE  
A SEPARATE  
FORM FOR  
EACH CHILD**

## INFORMATION FOR THE CHILD CELEBRATING:

FULL Christian Name:

\_\_\_\_\_

*\*This name will appear on certificate & must match name on baptismal certificate.*

My family is registered at the Pro-Cathedral of the Assumption. YES  NO

I was baptized at the Pro-Cathedral of the Assumption. YES  NO

My baptism date at the Pro-Cathedral was: \_\_\_\_\_  UNKNOWN

If you **were not baptized** at the Pro-Cathedral of the Assumption, please provide a **copy of the baptismal certificate** from the parish where you were baptized.

<u>OFFICE USE ONLY</u>
No: _____
Date: _____

<b>Gender</b>	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
<b>Date of Birth</b>		
<b>Place of Birth</b>		
<b>Date of Baptism if at another Parish</b>	<i>A copy of the baptismal certificate is required if baptized at another parish.</i>	
<b>Church of Baptism &amp; Mailing Address</b>		
<b>School Attending</b>	<b>Grade Level:</b>	
<b>Full Name of Father</b>		
<b>Name of Mother</b>	<b>Mother's Maiden Name:</b>	
<b>Home Street Address</b>		
<b>City &amp; Postal Code</b>	<b>Postal Code:</b>	
<b>Telephone Number</b>		
<b>Email Address VERY IMPORTANT</b>		

Please Return Completed Form **AND COPY OF CERTIFICATE** by email to: [cathedral@bellnet.ca](mailto:cathedral@bellnet.ca)

Or, by placing a print copy in the Collection Basket or Delivering it to the Parish Office: 480 McIntyre St., W.