St. Jerome's Catholic Parish

36 Troode Street, Lake Coogee 6163
Tel: (08) 94181229 Website: www.stjeromesparish.org



ENROLMENT FORM FOR FIRST HOLY COMMUNION

ONE FORM FOR PER CHILD

Please use the **BLOCK LETTERS** when completing the form

CHILD'S NAME:			
DATE OF BIRTH:	_ SCHOOOL	CLASS:	
HOME ADDRESS:	SUBURB:		
		_	
FATHER'S NAME:			
RELIGION:	PARISH:		
ADDRESS:	SUBURB:		
MOBILE NO:	HOME NO:		
EMAIL ADDRESS:			
MOTHRE'S NAME:	MAIDEN NAME:		
RELIGION:	PARISH:		
ADDRESS:	SUBURB:		
MOBILE NO:	HOME NO:		
EMAIL ADDRESS:			
ARE YOU REGISTERED MEMBERS OF ST. JEROME'S CHURCH: YESNO			
If not, do you wish to register? YES / NO. By circling "YES" we will email you parish registration forms.			
Are you registered at another Parish?			

SACRAMENTS RECEIVED (Please provide a copy of the certificate)				
BAPTISM (date and place):				
RECONCILIATION (year and place	?):			
CONSENT AND AGREEMENT:				
faith community, in particular, the Sacrament.	, to celebrate Sunday Mass wit	rtunity to experience belonging to a parish h the community as part of preparation for		
 We are committed to the faith formation of our child by encouraging to participate in the preparation for the Sacrament 				
 We agree to journey with our and child workshop, retreat) as 	•	ssary requirements (such as classes, parent		
• We consent to my child's nam	e and photograph being publis	hed in the Parish YES / NO		
·	<u> </u>	records, pastoral care of the students and lose your information to any third party.		
Father's Signature	OR	Mother's Signature		
The fee to cover the expenses related etc) will be \$30 per student or \$50 pe child(ren)'s SACRAMENTS. Please	r family. Do not allow the co			
Children attending ST. JEROME'S	CATHOLIC PRIMARY SCI	HOOL must return the completed form,		
and fee to the school no later than 26	oth February 2021. All other	er children must return the completed form		
with the Baptism Certificate to the Pari	sh Office during the office hou	ırs.		
If you have any queries please contact l	Fr. Vijay D'Souza, CRS or Mr	s. Carol Hoare		
Office use only				
Paid/ Receipt No:	Date of subm	ission		