

HOLY REDEEMER PARISH 1st Communion & 1st Reconciliation REGISTRATION FORM 2024-25

Please **print** all information to ensure accurate sacramental records Return to Faith Formation Office by November 1, 2024

PLEASE PRINT CLEARLY USING BLUE OR BLACK INK.

FULL NAME OF STUDENT:			
	First	Middle (not initial)	Last
If child was baptized under a different name, please indicate:			
PLACE OF BIRTH (City and St	ate):	BIRTHDATE:	
AGE OF STUDENT WHEN REC	CEIVING 1 st Com	munion (5/4/2025):	GRADE:
*Church of Baptism:			
*Date of Baptism:			
If not baptized at Holy Redeemer, a copy of the Baptismal Certificate will need to be attached to this form			
In order to ensure accurat	te sacramental	recording, the following info	rmation is also needed
NAME OF PARENT(S):			
CURRENT ADDRESS:			

MOTHERS MAIDEN NAME: _____