

**Sacred heart cathedral**

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**FIRST RECONCILIATION & FIRST COMMUNION**

**REGISTRATION FORM**

***PLEASE PRINT WHEN FILLING OUT THIS FORM***

**PLEASE NOTE**: This registration can be only accepted and processed only if accompanied by a photocopy of your child’s **BAPTISMAL CERTIFICATE.**

**The children cannot prepare for the Fist Holy Communion if they did not first prepare for and celebrate their first Reconciliation. The two sacraments go together.**

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| **Part 1. Child’s Information** | |
| **Full name:** | |
| **Date of birth:** | **Place of birth:** |
| **Child’s School:** |  |
| **Mother’s first and maiden name:** | |
| **Mother’s religion:** | |
| **Father’s full name:** | |
| **Father’s religion:** | |
| **Parents’ Address:** | |
| **Phone number(s):** | **Email:** |
| **How long have you been attending mass at this church?** | |
| **Have you had other children baptized at this church?** | |
| **□ Sacramental Marriage or □ Civil Marriage** | |
| **Date of marriage:** | **Place of marriage:** |
| **NAME AND ADDRESS OF CHURCH WHERE YOUR CHILD WAS BAPTIZED** | |
| **PLACE OF BAPTISM: (***Parish/Mission, City/Town and Territory/Province, Country)***:** | |
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***PARISH OFFICE NOTES:***