

APPLICATION FOR FIRST HOLY COMMUNION PROGRAMME

(FOR CHILDREN ATTENDING CATHOLIC SCHOOL)

PHOTO

(PLEASE USE CAPITAL LETTERS THROUGHOUT)

CHILD'S DETAILS:

CHILD'S NAME AND SURNAME:

DATE OF BIRTH:

PLACE OF BAPTISM: DATE:

DOES YOUR CHILD HAVE ANY SPECIAL NEEDS OR CONDITIONS THAT IT WOULD REQUIRE EXTRA HELP?

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(IF NOT BAPTIZED IN ST. JOHN VIANNEY'S PARISH, PLEASE SUPPLY A COPY OF YOUR BAPTISM CERTIFICATE)

DETAILS OF FAMILY:

PARENT'S/GUARDIAN'S NAME(S).....

ADDRESS:

TELEPHONE (HOME):

(MOBILE):

EMAIL ADDRESS:

MASS ATTENDANCE:

WHICH CHURCH DO YOU NORMALLY ATTEND?

WHICH MASS DO YOU USUALLY ATTEND?

TO QUALIFY FOR REGISTRATION FOR THE FIRST COMMUNION PROGRAMME ST JOHN VIANNEY'S, WEST GREEN, MUST BE YOUR REGULAR PLACE OF WORSHIP. IF YOU ATTEND MASS IN ANOTHER PARISH ON A SUNDAY THEN THAT IS THE PARISH WHERE YOU SHOULD REGISTER YOUR CHILD.

SCHOOL:

PRESENT SCHOOL:..... YEAR

YOUR CHILD MUST BE IN PRIMARY CLASS 3 OR ABOVE TO REGISTER FOR THE FIRST HOLY COMMUNION PROGRAMME.

SIGNATURE: DATE:

**ST JOHN VIANNEY CHURCH, WEST GREEN.
PLEASE RETURN TO THE PARISH OFFICE AT 4 VINCENT ROAD (N15 3QH)
OR EMAIL TO WESTGREEN@RCDOW.ORG.UK**