

APPLICATION FOR THE RECEPTION OF FIRST HOLY EUCHARIST 2021-2022

Please print clearly.

Student's Last Name _____ First _____

Date of Birth: _____ City of Birth: _____

Primary Address: (street, city, zip) _____

Family email(s): _____

Home Phone: _____ Cell Phone (s): _____

Registered Parish: IC ____ Other ____ Please Identify _____

School Attending: _____ Grade _____

(Children who attend a Public School or who are Home Schooled must also enroll in Faith Formation.)

Photographs and/or videos of minors are taken periodically for use in parish publications and displays. In signing this authorization, you are acknowledging this and granting permission to Immaculate Conception to use your child's name, photo and videos in print/electronic publications and displays.

Signature _____

If necessary, my child has my permission to participate with on-line Sacramental Preparatory classes.

Signature _____

Record of Baptism

**For children Baptized at IC, please provide the date of Baptism.
All others must also provide a copy of the Baptismal Certificate.**

Date of Baptism: _____ Parish: _____

Address: _____

City: _____ State: _____ Zip: _____

Father's Name: _____

Mother's Name (include maiden name): _____

Godparents: _____

Sacramental Fee \$40

PLEASE RETURN WITH PAYMENT TO
FAITH FORMATION (K - 8) OFFICE, IMMACULATE CONCEPTION PARISH VIA EMAIL OR US MAIL.
APPLICATIONS MAY ALSO BE DROPPED OFF TO THE OFFICE. PAYMENT MAY ALSO BE MADE ON-LINE.

FEE PAID: Check # _____ Cash _____ On-Line _____
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