## **FIRST COMMUNION REGISTRATION FORM**

The Parish needs the following information for its registers. Please fill out the form as soon as possible and bring it at the next class or mail it to the Parish office (110-80 rue St Pierre WPG R3V 1J8). You may also email it to <a href="mailto:paroissestnorbert@gmail.com">paroissestnorbert@gmail.com</a>. Thanks for your cooperation.

\* NOTE: If your child was baptized in another parish than Saint-Norbert, it is necessary to obtain a photocopy of their Baptism Certificate. Please attach the certificate to this form.

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CHILD'S INFORMATION								
Child:			1		1			
	Family Name		First Name		ALL Other Names			
Birth date:	1			/				
	Date	Month	1	Year				
Birth Place:								
	City				Province			
Baptism Date:	/		1		Certificate attached * □			
	Date	Month		Year				
Parish of Baptis	sm:				1	,	1	
Parish Name				City		Province		
DADENTS! INFORMATION								
PARENTS' INFORMATION								
Father:	Family Name		1	First Name		ALL Othe	r Names	
Mothori	r anning realing		,	r iiot rtainio	1	7.22 0.1131 11411133		
Mother:	Birth Name			First Name	1	ALL Other Names		
Physical Address	s:							
Street								
	1				1	/	-	
Box Number (if the	case)		Ci	ty/Town		Province	Postal Code	
Telephone:	t way to be contacted: Home or CELL			Father's Wor	Father's Work		Mother's Work	
Email:				r dator o vvoi		Would	or o vvonk	
EIIIaII.	Father <u>OR</u>	Mother						
Parishioners of:								
	Name of Parish				City		Province	

FOR PARISH OFFICE ONLY

☐ Payment Received (method & amount)