



**FIRST RECONCILIATION AND FIRST COMMUNION  
SACRAMENT REGISTRATION FORM  
SACRAMENT YEAR 2010-11**

**\*\*\*NOTE:\*\*\***

*Your child must have completed an age 6 (first grade) program to register for this sacrament.*

**GENERAL INFORMATION**

*PLEASE COMPLETE BACK AND FRONT*

Child's Baptismal Name: \_\_\_\_\_  
*(Enter full name as written on baptismal certificate)\**

Child prefers to be called: \_\_\_\_\_

Child's Birth Date: \_\_\_\_\_ Birth Place: \_\_\_\_\_

*\*Name changes due to adoption, or other circumstances that legally change the child's name will not have been changed at their church of Baptism.*

**PARENT CONTACT INFORMATION**

Father/Guardian Full Name: \_\_\_\_\_

Mother/Guardian Full Name: \_\_\_\_\_ Maiden: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email address\*: \_\_\_\_\_

*\*Email will be used for all communication--please be sure to check on a regular basis*

**PARISHIONER VERIFICATION**

Are you a registered parishioner of St. Peter Chanel?  Yes  No\*

*\*If no, you must register with the parish before registering for the Sacrament Program*

**1<sup>st</sup> GRADE FOUNDATIONAL PREPARATION VERIFICATION—(required)**

My child was enrolled in the St. Peter Chanel PSR program.

My child attended a Catholic School. Name of School: \_\_\_\_\_

My child was enrolled in another PSR program and a letter of verification is attached.

**2<sup>nd</sup> GRADE FOUNDATIONAL PREPARATION VERIFICATION**

My child is enrolled in the St. Peter Chanel PSR program.\*

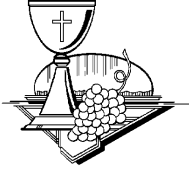
*\*Note: You must complete the PSR Registration Form to enroll your child in a PSR Session. This form provides information for the sacrament only.*

My child attends Catholic School. A copy of my child's Baptismal Certificate and a \$50 Registration fee is attached. Name of Catholic School: \_\_\_\_\_

**MEDICAL AND PHOTO RELEASE INFO---For Catholic School children only**

I have completed a medical and photo release form\*

*\*Need additional forms? Go to [www.stpeterchanel.org](http://www.stpeterchanel.org) →Parish School of Religion→Forms & Calendar*



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**BAPTISM VERIFICATION**

- MY CHILD WAS BAPTIZED AT SAINT PETER CHANEL CATHOLIC CHURCH.**
  - Baptism month and year \_\_\_\_\_
  
- MY CHILD WAS BAPTIZED IN THE CATHOLIC CHURCH—(NOTE: a copy of your child's baptismal certificate is required to be on file. If lost, please contact the baptismal church for a new copy.)**
  - Baptism Date: \_\_\_\_\_
  
  - Name of Baptismal Church: \_\_\_\_\_
  
  - Baptismal Church mailing address (please include street, city, state, country, etc)  
\_\_\_\_\_  
\_\_\_\_\_
  
- MY CHILD WAS NOT BAPTIZED IN THE CATHOLIC CHURCH—(NOTE: a copy of your child's baptismal certificate is required to be on file. If lost, please contact the baptismal church for a new copy.)**

Please know that being baptized in another Christian faith does not impede your child from the celebration of the Sacraments in any way, but does require special awareness and consent from your child.

The Profession of Faith affirms the child's desire to practice the Catholic Faith and declares Saint Peter Chanel as the child's church of record for subsequent sacraments. This profession will be witnessed by you, and considered sponsored by your child's religious education teacher. A certificate listing the date of this profession will be included in your child's First Communion certificate. In order to properly record these events, please provide us with the following information. If you need further clarification on this issue, please contact Rosemary Potts at 678-832-1236 or Cathy Marbury at 678-832-1229.

- For Children who have been baptized in another Christian denomination:  
  
Baptismal Date: \_\_\_\_\_  
Church of Baptism: \_\_\_\_\_  
  
Religious Denomination: \_\_\_\_\_  
  
Church address (please include street, city, state)  
\_\_\_\_\_  
\_\_\_\_\_
  
- For Children who have already made a Profession of Faith:  
  
POF Date: \_\_\_\_\_  
Church of POF: \_\_\_\_\_  
  
Church address (please include street, city, state)  
\_\_\_\_\_  
\_\_\_\_\_