SACRAMENTAL PROGRAM 2021

SACRED HEART PARISH, TOOWOOMBA (cnr. North/Tor Sts.)

Tel: 07-4634 8488 Email: info@sacredheartparish.com.au

SURNAME:			
PARENTS:			
	HER: RELIGION (CHURCH):		
	ADDRESS:		
	(house)	`	iobile)
EMAIL ADDRESS:			
MOTHER: RELIGION (CHURCH):			
ADDRESS:			
CONTACT NO.:	(house)	(m	nobile)
		`	,
	OR THE SACRAMENTS:		
Please indicate the name/s o older are welcome to participelease tick the appropria	of child/children you wish to receipate in the sacramental program. It column for the sacraments you		Ç
DETAILS	CHILD 1	CHILD 2	CHILD 3
NAME OF CHILD:			
DATE OF BIRTH:			
BAPTISED (YES/NO):			
CHURCH and Location			
where child was BAPTIZED:			
NAME OF SCHOOL:			
YEAR LEVEL:			
SACRAMENTS:			
RECONCILIATION			
FIRST EUCHARIST			
CONFIRMATION			
	tal Program is \$25 per Sacrame various materials, w Please provide a copy of your c	orkbooks and gifts.	
CHILD FOR BAPTISM: Perhaps you have a child not Name of Child:	t yet baptized. Please indicate bel	ow if you want to have your	-

Please return this form ASAP, together with a copy of your child's Baptismal Certificate and your \$25 levy. Forms may be returned to Father after Mass, the Sacred Heart Parish office, mailed to Sacred Heart Parish: 302 North St, Toowoomba, or given directly to Emilie Yap, Therese Swain or James Wren (School APRE).