St. Joan of Arc Parish
First Reconciliation/First Eucharist Registration Form
2017-2018

Are you a registered member of St. Joan of Arc Parish? _____

If not, where are you registered? _____

Father's Full Name _____

Mother's *Full Name _____

***(Include Maiden Name)**

Address:_____
Number – Street City State Zip

Phone :_____
Home Cell Email

Child's Name: _____
First Middle Last

Child's Age: ____Date of Birth_____ Place of Birth _____
City State

Date of Baptism:_____ Church of Baptism_____

_____
City State

Fee: There is a **$60.00 sacramental fee**. This fee helps defray the cost of First Reconciliation/Eucharist Parent-Child books, materials, and Jesus Day. Make checks payable to St. Joan of Arc.

Check enclosed _____ Cash enclosed _____

Please return this form to Sr. Judy in the Office of Faith Formation by **November 13, 2017.

Thank you for your cooperation!

Office Use Only

_____Baptism verified

_____Sacramental Fee

_____Check #

_____Date

THE *ORIGINAL OR PHOTOCOPY OF BAPTISMAL CERTIFICATE MUST BE ATTACHED, IF NOT ALREADY SUBMITTED TO THE OFFICE OF FAITH FORMATION.

You must attach the *original or photocopy of your child's Baptismal certificate, even if your child was baptized at St. Joan of Arc Parish.