

Fourteen Holy Helpers/St. John XXIII Religious Education
Information for Eucharist

Child's legal name: _____ Father's Name: _____

Mother's First & Maiden: _____ Child's date of birth & age _____

Home Address: _____

(Street)

(City)

(State and zip code)

Phone Numbers: home _____ cell _____

Parish: _____

Email Address: _____

Date and Parish of Baptism: _____

(Date)

(Parish)

(Address – Street, City, and State)

Date and Parish of Reconciliation:

(Date)

(Parish)

(Address – Street, City, and State)

***If we don't already have a copy of your baptismal certificate, please make sure that we receive one as soon as possible.**

****Print your child's name as you would like to see it written on their First Eucharist Certificate.**

Example, John Jacob Smith or John J Smith or John Smith (no nicknames, please)

Sacramental Fee to cover supplies, etc. is \$20.00

For Office Use only: Sacramental fee Paid: _____ cash _____ check no.

Date: _____

Baptismal certificate: _____ yes _____ no