

## Parish of St. Gregory the Great

71 Williamsons Road Doncaster Vic 3108 Phone: (03) 9412 8425

Email: Doncaster@cam.org.au

## REGISTRATION FOR SACRAMENTAL PREPARATION

Child's Full Name	e:		
Date of Birth: _	Age:	Grade at Sch	nool:
School:			
Baptised at:			
Place:			
Date of Baptism:			
Mother's Full Na	me (Maiden):		
Father's Full Nan	ne:		
Home Address:			
Email Address: _			
Contact Phone:	Eme	rgency Phone:	
Health Condition	(allergies /other):		
Class to Enrol: (	) First Reconciliation (	) First Eucharist (	) Confirmation
by the Catholic P	ccident or illness during a arish of Doncaster, I auth ce as my child shall requi	orise the obtaining	_
	Parent's Signature:		
	Date: _		

Please return this form together with a copy of your child's Baptismal Certificate to Margaret O'Donnell. The catechetical fee is \$100 per child per Sacrament. Please make payment by electronic transfer, our bank details are as follows:

BSB: 083 347 Account No: 570157667 Account Name: St Gregory the Great Parish