



Grace and Peace be yours
In abundance (1 Peter 1:2)

**APPLICATION FORM
FOR THE
PARISH BASED SACRAMENT
PROGRAM
2023**
Applications close 24 February 2023

Catholic Parish of Epping, Epping North
Parish Office
13 Davisson Street
Epping, Vic 3076
Ph: 9401 6300
Email: epping@cam.org.au
Web: www.cam.org.au/epping

Full Name of Child:.....M/F.....
I am registering my child to prepare for the Sacrament of: *please circle*
FIRST RECONCILIATION (year 3) **FIRST EUCHARIST (year 4)** **CONFIRMATION (year 6)**
Date of Birth:...../...../..... School they attend:Year:

Mother/ Female Guardian

Mrs/Ms.....
AddressPostcode.....
Phone: (H).....(W).....(Mobile).....(Alt).....
Email address:.....@.....
Religion:.....
Does the child live with this parent/guardian YES NO

Father/ Male Guardian Name

Mr.....
AddressPostcode.....
Phone: (H).....(W).....(Mobile).....(Alt).....
Email address.....@.....
Religion:.....
Does the child live with this parent/guardian YES NO

WE WORSHIP AT: (please circle) **ST PETER'S CHURCH** Saturday 6.30pm Sunday 9.00am /10.30am
ST MARY OF THE CROSS MACKILLOP Saturday 5.00pm

Sacraments History

Photocopy of the Certificate is required at time of registration.
Date of Baptism: Name of Church:.....
Address of Church:

Please enclose **\$100.00** donation to offset our Sacramental costs.