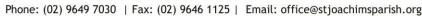


2 MILLS STREET LIDCOMBE NSW 2141 AUSTRALIA ABN: 29 748 376 716





ENROLMENT FORM SACRAMENT OF FIRST HOLY COMMUNION

For children aged 9 years and above (usually in Year 3) and have received the Sacraments of Baptism and First Reconciliation.

Please complete this form and return with your payment of \$25 to the RE Coordinator (in Lidcombe and Newington Public schools) OR directly to St Joachim's Parish Office.

TO BE RETURNED BY 10 June 2024

CHILD'S FULL NAME	(MALE/FEMALE)
CHILD'S PLACE & D.O.B	
ADDRESS:	
DATE & CHURCH OF BAPTISM	
(Please supply a copy of Baptis	m & 1 st Reconciliation Certificate)
CHURCH & DATE OF FIRST RECONCILIATION	ν
PARENTS' FULL NAME	
	_ EMAIL:
SPECIAL NEEDS: YES /NO. If yes, please give	details
NAME OF SCHOOL	CLASS
PAYMENT OF \$25 CASH/ CHEQUE ENCLOSE books and other resources	D (payable to St Joachim's Parish, Lidcombe) for



(see next page)

FAMILY DETAILS (for our Parish Records.)

FATHER'S FULL NAME		RELIGION:	_ RELIGION:	
		RELIGION:		
MOTHER'S MAIDEN NAME				
OTHER CHILDREN:				
NAME:	D.O.B	RELIGION:		
NAME:	D.O.B	RELIGION:		
NAME:	D.O.B	RELIGION:		
	SMALL GROUP PREFEI	RENCE		
Sessions for this Sacrame preferential order – 1 being	ent. Please indicate below t	the Information Night and Prepara he sessions you wish to attend noice etc), that is most suitable to ate your preference.	d (in	
Tuesday 3:30pm – 4:3	0pm in St Joachim's Parish Hall			
Saturday 3:00pm – 4:0	0pm in St Joachim's Parish Hal	I		
Sunday 11:30am – 12:	30pm in St Joachim's Parish Ha	all		
COMMENTS (any additiona	l information that you want us to	know):		
			_	
			_	