



St. James Parish Registration Form

Sacraments of First Reconciliation & First Communion

2018-2019



CHILD INFORMATION

_____ M / F Roman Catholic
 Last Name First Name
 ____ / ____ / ____ Age Grade School
 Date of Birth (M/D/Y)

 Church of Baptism Town/City/Country

Child lives with:
 Both Parents
 Father
 Mother

PARENT INFORMATION

FATHER

 Last Name First Name
 Religion: Roman Catholic Other: _____

MOTHER

 Last Name (if different) First Name
 Religion: Roman Catholic Other: _____

CONTACT INFORMATION

 Address (where the child resides)

 Town / City Postal Code

 Phone: Home Phone: Mobile

Email Address(es) – used for communication before/during sessions (ex: session changes, reminders, etc...)

Registered Parishioners at: St. James Okotoks St. Michael's Black Diamond Not registered – form attached

**I COMMIT TO PREPARING MY CHILD FOR HIS/HER
FIRST RECONCILIATION AND FIRST COMMUNION**

Signature of Parent/Guardian

FOR ST. JAMES PARISH OFFICE USE ONLY

Parish Registration Complete Form Attached Registration Fee (\$60) _____
Baptismal Certificate On file Copy Attached Will bring in: Received - _____

Questions or concerns: Please contact us at 403.938.3122