Holy Rosary Parish Community

founded 1931



CHILD'S NAME (in full)

www.holyrosarynedlands.org.au nedlands@perthcatholic.org.au (08) 9386 1870 ABN 21 724 113 314 46 Thomas Street Nedlands WA 6009



Parish Priest: Fr Gavin Gomez Parish Centre: Cnr Elizabeth & Tyrell Carmel Monastery: 100 Adelma Road

SACRAMENT APPLICATION FORM

Date of Birth: Se	
Date & Place of Baptism:	
[Copy of Baptism Certificate required if not baptized	* **
School	Year
FAMILY DETAILS	
Father's Name (full): Rel	•
Mother's Name: (full): Rel	igion:
HOME ADDRESS:	
Mobile: (Father) (Mother)	
Email: (please print clearly)	
Signature	Date:
SACRAMENT REQUESTED	
<u></u>	_
First Reconciliation First Holy Communion Confirmation	
[Copy of the Certificate for a previous sacrament completed is requested]	
Sacrament Donation for Loreto students: \$15	
PREP (After-School) \$30 (to cover cost of workbook)	
	•
PREP (AFTER-SCHOOL) APPLICANTS	
a) Please give appropriate details if your child has any physical, educatissues of which we should be aware?	
b) I/We, (parents or guardians) authorise this child to receive any em	
attention should it be required in the event that I/we cannot be contacted.	
Signature Date	