

**2017-2018 Sacramental Registration Form**  
**(First Reconciliation, First Communion, Confirmation)**

Child's Full Name \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_ Preferred method of contact \_\_\_\_\_

School Child Attends \_\_\_\_\_ Child's Date of Birth \_\_\_\_\_

I am registering my child in preparation for (circle all that apply):

First Reconciliation

First Communion

Confirmation

**Requirements for Registration:**

1. *A copy of your child's Baptism certificate must be submitted to the Religious Education Office by **November 5, 2017** in order for your child to participate in preparation for any of the sacraments. No exceptions.*
2. *All candidates for sacramental preparation must have received **two consecutive** years of Religious Education.*
3. *This form must be returned to the Religious Education Office with a \$15.00 book fee and copy of your child's Baptism certificate by **November 5, 2017**.*

Please circle "yes" or "no" for the following statements, and, if "yes," indicate the date and place where your child received these sacraments.

**My child has been Baptized:**                      Yes    No                      Date \_\_\_\_\_ Place \_\_\_\_\_

**My child has received 1<sup>st</sup> Reconciliation**    Yes    No                      Date \_\_\_\_\_ Place \_\_\_\_\_  
Grade 2 or above. Child must be baptized in the Catholic Church.

**My child has received 1<sup>st</sup> Eucharist**                      Yes    No                      Date \_\_\_\_\_ Place \_\_\_\_\_  
Grade 2 or above. Child must be baptized in the Catholic Church.

**My child has received Confirmation**                      Yes    No                      Date \_\_\_\_\_ Place \_\_\_\_\_  
Grade 8 or above. Child must be baptized in the Catholic Church.

***By enrolling your child in this process, parents and guardians agree to attend all meetings and activities and agree to help their child with preparatory sacramental materials at home.***

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please contact Donna Burney at the Religious Education and Youth Ministry Office if you have any questions.*  
St. Matthew's Catholic Church - 1773 Blanding Blvd. Jacksonville, FL 32210 - (904) 388-1207 - donna@stmatthewsjax.com