

FIRST EUCHARIST 2019-2020 APPLICATION

Please complete all of the information on this form and return it with a Baptismal Certificate, Photo Policy, and the \$75.00 program fee per child to:

St. Patrick Religious Ed Office. 131 Channing Avenue. Malvern, PA 19355

CANDIDATE INFORMATION

Child's First Name	Middle	Last
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Street Address	City	Zip
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Child's Birth Date	Place of Birth (City, State)	Age as of 4/2020
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BAPTISMAL INFORMATION

Name of Church Where Your Child Was Baptized

Street Address of Church	City	State	Zip
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Date of Your Child's Baptism:	Month	Day	Year
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Father's First Name	Father's Last Name
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Mother's First Name	Mother's Maiden Name
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PLEASE REVIEW, SIGN AND RETURN BY DECEMBER 1, 2019

A copy of my child's Baptismal Certificate is enclosed. *A Baptismal Certificate copy is required from every sacrament candidate. If you do not have one please contact the Church where your child was baptized.*

My \$75.00 Program contribution is enclosed payable to St. Patrick Church.

Signature: _____ Date: _____ Relationship to child: _____