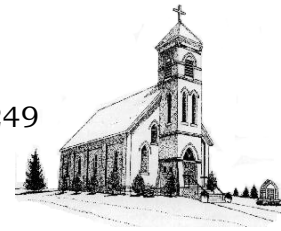


St. Francis de Sales - Blessed Sacrament Parish



17 Elmsley Street North, Box 1153,
Smiths Falls ON K7A 5B4
Phone: 613-283-0220 Fax: 613-283-0249
Web page: www.stfrancis-smithsfalls.com
E-mail: stfrancis.sf@gmail.com



Registration for the Sacraments of First Reconciliation and First Eucharist

*Our family wishes to support our child in the preparation program
for the sacraments of First Reconciliation and First Eucharist.*

Candidate's name: _____ Date of Birth _____
Last Name First Name Month Day Year

Candidate's Address & Postal Code _____
_____ Tel. Number _____

School Attending: St. Francis de Sales Ecole-Ste-Marguerite
Other _____

Parish Church: St. Francis de Sales, Smiths Falls
Blessed Sacrament, Lombardy
Other (please specify) _____

Note: A copy of the Catholic Baptismal Certificate is required for registration (If baptized at St. Francis de Sales or Blessed Sacrament, the date of baptism is sufficient).

Candidate's Date of Baptism: _____

Candidate's Parish of Baptism: _____

Father's Name: _____

e-mail address: _____ Tel: _____

Mother's Maiden Name: _____

e-mail address: _____ Tel: _____

Which parent is the best contact person? Mother Father Both

Please return this form to the Parish Office