

# Enrolment for the Sacraments of Reconciliation, Confirmation and Eucharist St Anthony's Parish, Harristown 2025

Family Surname: .....

<b><u>Full</u> Given Names of Candidate</b>	<b>Date of Birth</b>	<b>Date and Place of Baptism (obtain a copy of certificate, unless baptized at St Anthony's)</b>	<b>School</b>	<b>Grade and Class</b>

Home Address: .....  
 .....  
 .....P/C.....

Home Phone Number: .....

Mother's Name: .....

Father's Name: .....

Mother's **Maiden** Name:.....

.

Address (only if different):.....

Address (only if different):.....

Phone: .....

Phone: .....

Email Address: .....

Email Address: .....

Religion: .....

Religion: .....

Preferred contact person: .....

Email  Phone  Post  Please tick one.

*We would like to retain this personal information on file so that we may include you, by way of invitation, in future parish family activities that you may find helpful or of interest. Many thanks!*