

**ST MARY’S PARISH HAMILTON SACRAMENTAL PROGRAM - ENROLMENT FORM**

Please fill in and return to Parish Office or St Mary’s School prior to first Meeting of the year.

**CANDIDATE’S INFORMATION:**

FULL NAME:

CANDIDATES ADDRESS:

DATE OF BIRTH:

DATE AND PLACE OF BAPTISM:

*If Candidate was not Baptised at St Mary’s Hamilton then a copy of original Baptismal Certificate needs to be sighted prior to reception of Sacraments of Initiation.*

**PARENTS/GUARDIANS INFORMATION**

FATHER’S NAME  
ADDRESS (IF DIFFERENT TO CANDIDATE):  
RELIGION

MOTHER’S NAME  
ADDRESS (IF DIFFERENT TO CANDIDATE):  
RELIGION

**CONTACT INFORMATION**

EMAIL ADDRESS  
*This will be an important means of communicating with you during the program.*

PHONE: Father Mobile	Landline:
Mother Mobile	Landline

**SACRAMENTS TO BE RECEIVED THIS YEAR:** If not, then year already received.

Sacrament of Healing:	RECONCILIATION	<input type="checkbox"/>	<input type="text"/>
Sacraments of Initiation	CONFIRMATION	<input type="checkbox"/>	<input type="text"/>
	FIRST EUCHARIST:	<input type="checkbox"/>	<input type="text"/>

**Signed:**      Mother/Guardian                                      Father/Guardian

*Please contact the Parish Office on 5571 1161, if you need clarification or further information needed about this form or the Sacramental Program in general.*