

# St. Ann's Catholic Church Kingston Hill



## 1<sup>st</sup> HOLY COMMUNION PROGRAM 2017-2018

Child's Details (Please print)

Christian names \_\_\_\_\_

Surname \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_

### Details of Baptism

(If the Baptism **did not** take place at St Ann's please provide a copy of the Baptismal Certificate and the full name and address of the Church where the Baptism took place.)

Name of Church \_\_\_\_\_

Full Address \_\_\_\_\_

Date of Baptism \_\_\_\_\_

Name of School \_\_\_\_\_ Class \_\_\_\_\_

## Parents Details

Mother Name \_\_\_\_\_

Religion \_\_\_\_\_

Father Name \_\_\_\_\_

Religion \_\_\_\_\_

Place of Marriage \_\_\_\_\_

eg St. Ann's Catholic Church Kingston

## Parental Consent

I give permission for my child, named above, to begin formation for the reception of his/her First Holy Communion. As the first educator of my Child in the ways of Faith, I guarantee that I will assist him/her in the preparations and bring him/her to Mass every Sunday and Holydays of Obligation and to all the events contained in the formation program.

In the unlikely event of any accident, injury or illness, I authorize the Parish Priest and/or his assistants to administer and/or to authorise, in my name, any first aid treatment, judged to be in my child's best interests, until I or another member of the family arrive to take charge of the situation. I draw your attention to the Medical Alert information entered below (If applicable) and will inform you in writing if there are any changes to this information which may affect my child's health.

## MEDICAL ALERT

My Son/Daughter Suffers from the Following condition and takes the following medication (E.g. Illnesses, Disabilities, Allergies or any other conditions that we should be made aware of)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/Guardian)

## INSTRUCTIONS

- Please ensure that you have included a copy of your child's baptism certificate with this form. We cannot process your form if you have not enclosed the certificate.
- Forms must be received by the Parish Office by no later than Sunday 9<sup>th</sup> October 2017
- The course is free. Those who can afford it are invited to pay £40 towards the cost of the books and other expenses.
- Please make cheques payable to: "St. Ann's RC Church".
- If you have any queries, please contact the Parish Office: **Saint Ann's House, Kingston Hill, Kingston upon Thames, Surrey, KT2 7LX. Telephone 020 8546 8732**

## CODE OF CONDUCT

- Families should attend Mass every Sunday with their children.
- Parents are required to attend the Parents' Meetings.
- The first meeting relates to important information about the programme; the remaining are catechetical.
- Families having difficulties with the schedule of classes should discuss this with the Parish Priest at the earliest opportunity.
- Please speak to/email your child's catechist if a class has been missed.
- Parents will need to cover the material missed for that class to ensure their child is fully prepared.

## ACCEPTANCE CRITERIA

- Completed forms must be returned by Sunday 9<sup>th</sup> October 2017
- Incomplete applications cannot be processed.
- Late forms will not be accepted.
- Children must be in Year 3 and 7 years old
- Our programme is limited to 20 children only.
- If we receive more than 20 applications, the following will apply:
  - First – Children of Registered Parishioners
  - Second - Children attending Holy Cross School
  - Third – Children of families living within the parish boundaries
  - Fourth – All other applicants (if places are available)

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

## Check List

- The form is signed.**
- A Baptismal Certificate is enclosed if the child was not baptized at St Ann's.**
- A photograph is enclosed**
- £ 40 for books and other expense.**