**A picture containing transport, wheel

Description automatically generatedSacramental Preparation Request Form – Year 1**

**RECONCILIATION – Grade 2 through 5**

**Sept. – Dec. 2023**

**By signing this form, I – the parent/guardian – am requesting that my child be brought into Full Communion with the Catholic Faith by making this first step in the Sacrament of Reconciliation – Year 1. I understand that this is the first year of a two-year preparation for Confirmation and Eucharist and that my child will be not be fully initiated into the Catholic Faith until they have completed the two year program.**

**My child, for whom I am requesting this Sacrament is:**

**Baptismal/Given Name:**

First Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Child’s Information:**

Date of Birth - \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_Place of birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_Current Grade \_\_\_\_School \_\_\_\_\_\_\_\_\_\_\_\_\_

Home Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State & Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Baptismal Information:**

Has your child been baptized? Y\_\_ N\_\_ Catholic? Y\_\_ N\_\_ Another Christian faith? Which? \_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Baptism - \_\_\_/\_\_\_ /\_\_\_\_\_\_\_

Church of Baptism - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* ***A copy of the Baptismal certificate MUST accompany with this form.***
* *If your child was baptized at St. Francis, a copy is not required. Please provide approximate baptismal date.*
* *If your child is* ***NOT******a baptized Catholic****, a different preparation will be required. Contact Faith Formation Office.*

**Father/Guardian’s Information:**

First Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child (if not the Father) - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mother/Guardian’s Information:** *You may leave areas blank that are the same as above.*

First Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Maiden Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child (if not the Mother) - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parish Membership:**

Our family is registered parishioners of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If St. Francis, Envelope Number? \_\_\_\_\_\_\_\_\_\_

If not registered at St. Francis, permission to attend St. Francis Sacrament Preparation from your own pastor IS required. Call the Faith Formation Office for more information.

Our family attends Mass Regularly \_\_\_\_ Occasionally \_\_\_\_ Seldom \_\_\_\_ Never \_\_\_\_

**Signatures for Sacramental Preparation Request**

Child’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Name – *printed* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_/ \_\_\_/ \_\_\_\_\_\_\_