



Sacred Heart Church

Founded in 1910

1307 – 14th Street SW

Calgary, Alberta, T3C 1C6

Telephone: (403) 244 - 2741 Fax: (403) 244 - 1446

Website: www.sacredheartcalgary.ca Email: secretaries@sacredheartcalgary.ca

Registration for 2018/2019 Sacrament of Reconciliation and First Communion

Personal Information - Please print

Date of registration: _____

Candidate's last name: _____

Candidate's first name: _____

Complete mailing address: _____

Telephone: _____

Email address: _____

Birthdate (month by name, day, year): _____

Place of Birth (city/town, country): _____

Father's last name and all given names: _____

Mother's maiden name and all given names: _____

Church and Town of parents' marriage: _____

***If you are not registered with Sacred Heart Parish, you will need permission of the Parish you are registered with in order to celebrate this sacrament at Sacred Heart Church.**

Deadline to Register is September 24, 2018.

PLEASE ATTACH A COPY OF THE BAPTISMAL CERTIFICATE, WITH THIS REGISTRATION



Sacred Heart Church

Founded in 1910

1307 – 14th Street SW

Calgary, Alberta, T3C 1C6

Telephone: (403) 244 - 2741 Fax: (403) 244 - 1446

Website: www.sacredheartcalgary.ca Email: secretaries@sacredheartcalgary.ca

Waiver of Consent

I accept that my son/daughter's (name above) participation in the Sacred Heart Parish Reconciliation and First Communion Preparation is entirely voluntary and all risks associated are assumed by my child(ren) and myself.

I will ensure that my son/daughter understands the authority of those leading the Reconciliation and First Communion Preparation, and will follow the instructions and rules give to him/her by those in charge, for the safety of him/herself, and all of those in the group.

I hereby agree not to hold the Parish, or any individual employed by/associated with the parish liable for any expense, loss, personal injury, or accident to my son/daughter which is not the result of any negligent act or willful default of any employee or agent of the Parish.

I hereby allow Sacred Heart Parish to distribute my son/daughter's name to fellow parishioners so that they may offer intentions for my son/daughter while they prepare for the sacrament of First Reconciliation and/or First Communion.

I hereby allow Sacred Heart Parish to take photos relating to the event of my child(ren) to be posted on social media (parish and affiliates' Facebook and Instagram), posted for the promotion and advertising of this and future related events.

Parent or Legal Guardian Name (print)

Parent or Legal Guardian Signature

Parent or Legal Guardian Name (print)

Parent or Legal Guardian Signature

Date _____