## The Catholic Communities of Our Lady of the Angels Parish REGISTRATION FORM For the Sacraments of FIRST RECONCILIATION and FIRST EUCHARIST

Child's Name:		/			
	Last name		Given Names(s)		
Date of Birth:			Gender MF	Age	
	Date (yyyy/mm/dd)				
ather:		/			
or Guardian's Name)	Last name		Given Name(s)	Religion	
Mother:		/			
or Guardian's Name)	Maiden name	,	Given Name(s)	Religion	
Baptism:					
	Date (yyyy/mm/dd)		Name of Church	City/Town	
A cor		rtificate must be ir	ncluded to complete regis	tration.	
Home Address:					
	Street Address		City/Town/Province	Postal Code	
E-Mail(s)	(1)		(2)		
.,					
Phone Number(s)	· · · · · · · · · · · · · · · · · · ·	(0.11)	(2.11)		
	(Home)	(Cell)	(Cell)		
Protection of privacy Act (PIP limited to photgraphs, digital i Parishes in the Archdiocese information may be collected rallies or other gatherings. A child's personal information the personal information may In the event that a child is spor required in order to collect, us another publication. Your consent is required in or remains in the program in quo celebration. Written notification to the pa	A) which establishes the stand images, videos or audio recordi take pride in celebrating and d used and disclosed include bu on may be collected at such an be used and disclosed on, but ecifically interviewed or identifie se and disclose personal inform order to use, collect and disclose estion; e.g. year after year in the rish or Archdiocese is required	ards as to the collection, in ngs. isplaying the work and the t are not limited to sacrar activity or event. When a not limited to, a website, d by name, consent provi- lation on, but not limited to se your child's personal in e case of catechism class should you wish to revok	ed to act in accordance with the Pers use and disclosure of personal inforr e gifts of their members. Activities in nental celebrations, social events, ca child is not specifically interviewed of a church-related publication or church ded by the Participant Consent Forr b, a website, church premises, radio formation. This consent is valid as I ses, a shorter time for First Commun e, modify, or change your consent. rsonal information may be collected	nation including but not a which personal atechism classes and or identified by name, ch premises. n and Release is also , television, or in an ong as your child ion preparation and In the event that you do	
l,	(parent/gua	rdian), hereby cons	ent to the collection, use ar	nd disclosure of	
the personal information of					
Signature of Parent/Guardian			Date		
egistration Fee Payme	nt Ontions:			Office	
	optionoi				

(2) Cheque (made payable to O.L. A. Parish)(3) e-transfer to: olangels.ftsask@caedm.ca

Office Use Only: Date of Registration \_\_\_\_\_ Fees Paid \_\_\_\_\_ PFS \_\_\_Certificate \_\_\_\_Register \_\_\_\_