

Wodonga Catholic Parish-2021 Confirmation/Eucharist

PLEASE PRINT CLEARLY AS THIS INFORMATION IS RECORDED IN THE REGISTER & APPEARS ON YOUR CERTIFICATE

| <u>Please note:</u> | | |
|---|---|---|
| The Sacraments of Confirmation/Euc | harist may only be celebrated after the S | acrament of First Reconciliation. |
| Child's FULL Name: | | |
| Child's Date of Birth// | | |
| Child's School: | Current y | /ear level at school: |
| Father's Name: | | |
| | | |
| Family Contact Details: | | |
| | | |
| Email Address: | | |
| Home Phone: | Mobile Phone: | |
| Meeting & liturgy Dates: Please | select the sessions you would like to | attend: (Please circle one) |
| Tuesday- 4:00 pm – 5:00 pm | Thursday – 6:00 pm – 7:00 pm | |
| August 3 rd | August 5 th | |
| August 10 th | August 12th | |
| August 17th | August 19 th | |
| August 24 th | August 26 th | |
| Intended | Date to receive the Sacrament (Ple | ase circle <u>)</u> |
| Saturday 28 [#] /08/21 @ 5:00pm | Sunday 29 th /08/21 @ 8:30am | Sunday 29 th /08/21 @ 10:30am |
| Saturday 11 th /09/21 @ 5:00pm | Sunday 12 th /09/21 @ 8:30am | Sunday 12 th /09/21 @ 10:30am |
| Family Commitment: | | |
| Regular involvement and support is vital faith formation. | in teaching of children, their preparation for r | eceiving the Sacraments and their ongoing |
| | I/we are p | |
| | time with them in prayer and attend the pricipate in the sacramental program. | program sessions and group gatherings |
| Signed Parent/Guardian: | Dat | 'e:// |
| | Mass as a sign that he/she is preparing to | _ |
| nave an insignia please indicate bei Insignia required (Please circle) | ow so one can be provided at a cost of \$ YES | NO |
| | | |

<u>Please note</u>: The cost of this program is \$40 if you require an insignia \$45 please returned the form with payment to the Parish Centre-no later than Monday JUNE 21st 2021.