

# First Reconciliation & First Eucharist Sacramental Preparation Meetings Registration Form 2015/16



St. Louis Church  
912 Superior St. / P.O. Box 843  
Keewatin, ON P.O. Box 1C0  
Phone #: 547-2376

**Name of Candidate:** \_\_\_\_\_  
Last Name
First Name
Middle Name

**Date of Birth:** \_\_\_\_\_  
Day
Month
Year

**Date of Baptism:** \_\_\_\_\_  
Day
Month
Year

**Church/Place of Baptism:** \_\_\_\_\_  
Church
City/Country

*{Please attach a copy of Baptismal Certificate if not baptized at St. Louis Church}*

**School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

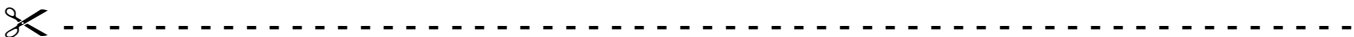
**PARENT INFORMATION:**

**Mother's Maiden Name:** \_\_\_\_\_  
Last Name
First Name
Religion

**Father's Name:** \_\_\_\_\_  
Last Name
First Name
Religion

**Home/Mailing Address:** \_\_\_\_\_  
Number/Street
P.O. Box/Comp. # / Site #
Postal Code

**Telephone Number:** \_\_\_\_\_  
(Home)
(Work)



**First Reconciliation 1<sup>st</sup> meeting: WED, Nov. 4<sup>th</sup>, 2015 – 6:00-7:00 pm**  
**First Reconciliation 2<sup>nd</sup> meeting: WED, Nov. 11<sup>th</sup>, 2015 – 6:00-7:00 pm**  
**First Reconciliation 3<sup>rd</sup> meeting: WED, Nov. 18<sup>th</sup>, 2015 – 6:00-7:00 pm**  
**CELEBRATION OF 1<sup>st</sup> RECONCILIATION: WED, Nov. 25<sup>th</sup>, 2015 – 6:00-7:00 pm**

*(These meetings are for parents & candidates. The meetings will be held at St. Louis Church, Keewatin)*