**Our Lady of the Rosary**

**Registration for First Holy Communion**

Child’s Name ----------------------------------------------------------------

Date of Birth -----------------------------------------------------------------

Date of Baptism ------------------------------------------------------------------

Place of Baptism ------------------------------------------------------------------

**(Please attach Certificate of Baptism with this registration form.)**

Father’s Name --------------------------------------------------------------------

Mother’s Name ---------------------------------------------------------------------

Religion of Parents ---------------------------------------------------------------------Mother

---------------------------------------------------------------------Father

Address ---------------------------------------------------------------------

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Email -----------------------------------------------------------------------

Phone ------------------------------------------------Home

------------------------------------------------Cell

------------------------------------------------Work

School Child Attends -----------------------------------------------------------------------

Church Child Attends ------------------------------------------------------------------------