

ATTACH A COPY OF
YOUR
CHILD'S BAPTISMAL
CERTIFICATE TO THIS
FORM **BEFORE** YOU
TURN IT IN!

**Sacramental Preparation
Reconciliation & First Communion
2019-2020**

Child's Name: _____ Grade: _____

Date of Birth: _____ School: _____

IMPORTANT

Your child must attend regular religion classes in order to participate in the preparation for Reconciliation and First Communion.
You must also be a registered member of Corpus Christi.

The Sacrament of **Reconciliation** has been scheduled for Sunday, December 8th, after the 9:45 mass.

First Communion masses will be on Saturday, May 2nd, during the 4:30 mass and Sunday, May 3rd, during the 9:45 mass.

Mother's name _____ Father's name _____

Family Address (include zip code)

Email (**write neatly**) _____ Phone _____

Reconciliation Preparation Dates

First Class - Oct. 20th, 11:00-12:30
Second Class – Nov. 3rd, 11:00-12:30
Retreat – Dec. 7th, 9:00-11:00

First Communion Preparation Dates

First Class – March 8th, 11:00-12:30
Second Class – April 5th, 11:00-12:30
Retreat – April 25th, 9:00-11:30

REGISTRATION FEE IS \$40 PER STUDENT

OFFICE USE ONLY PAID: CHK# _____ CASH: _____