



**IMMACULATE HEART  
OF MARY PARISH**  
SCARBOROUGH

## **SACRAMENT OF RECONCILIATION ENROLMENT FORM 2025**

Please use **BLOCK LETTERS** when completing this form

<b>LAST NAME:</b>	
<b>FIRST NAMES:</b>	
<b>DATE OF BIRTH:</b>	
<b>HOME ADDRESS:</b>	
<b>SUBURB &amp; POSTCODE:</b>	
<b>CONTACT NUMBER:</b>	
<b>EMAIL ADDRESS:</b>	
<b>DATE OF BAPTISM:</b>	
<b>PLACE OF BAPTISM:</b>	
<b>FULL NAME OF CHILD'S FATHER:</b>	
<b>FULL NAME OF CHILD'S MOTHER:</b>	
<b>PARISH NAME:</b>	

### **Important Information**

Please note:

- **COMMITMENT MASS: Saturday 15th February at 5pm and Sunday 16th February at 7.30am & 9.30am**  
(Immaculate Heart of Mary)
- **PARENT CHILD WORKSHOP: Tuesday 25th March at 5.00pm-6.30pm**  
(Learning Hub, St John's Primary School)
- **RETREAT: Tuesday 1st April at 9.30am-2.00pm**  
(Upper room - St Joseph, Subiaco)
- **SACRAMENT: Wednesday 9th April after 9.00am Mass**  
(Immaculate Heart of Mary)
- **THANKSGIVING MASS & Presentation of Certificates: Saturday 17th May 5.00pm**  
(Immaculate Heart of Mary)



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**Attached:**

- |  |                          |
|--|--------------------------|
| <b>1 Copy of Baptism Certificate</b>                                 | <input type="checkbox"/> |
| <b>2 Completed Parish Membership and DDR if not already a member</b> | <input type="checkbox"/> |

- I certify that the information provided is true.
- I commit to fully supporting my child's preparation for the Sacrament of First Reconciliation.
- I understand that attendance at all components is required for my child to be fully prepared to receive the Sacrament of First Reconciliation on **Wednesday 9th April 2025**.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date