



First Holy Communion Registration Form

Please complete this form and return it to the parish

(PLEASE PRINT)

Parish Information

- HOLY CROSS Parish boundaries: N: King St W, King St E; E: Central Park Blvd S, Olive Av, Wilson Rd, south on eastern Oshawa Creek, Oshawa Harbour; S: North on western Oshawa Creek, west on Railway tracks; W: Stevenson Rd S.
- ST. GREGORY'S Parish boundaries: N: Rossland Road; E: Central Park Boulevard N; S: King Street; W: Park Road N.

Name of Parish: _____ City: _____

☐ I currently live within the territorial boundaries of the parish.

☐ I currently **do not** live within the territorial boundaries of the parish, but I am formally registered at the parish.

Child's Information

Full legal name of child:

First Name Middle Name(s) Last Name

☐ Male ☐ Female Date of Birth: _____ City of Birth: _____

Church of Baptism: _____ Date of Baptism: _____

Address of Baptismal Church: _____

Parent's Information : __ Married in the Catholic Church; __ married civilly; __ common-law; __ separated; __ divorced; __ single

Mother (Full legal name & Maiden Name):

First Name Middle Name(s) Last Name (Maiden Name)

Religion: ☐ Roman Catholic Other: _____ ☐ None

Present Address: _____

Street

City

Postal Code

Phone: _____ Email: _____

☐ I am a parent of, or have legal custody of the child.

Father (Full legal name):

First Name Middle Name(s) Last Name

Religion: ☐ Roman Catholic Other: _____ ☐ None

Present Address: ☐ Same as mother's

Street

City

Postal Code

Phone: _____ Email: _____

☐ I am a parent of, or have legal custody of the child.

Declaration

I, the undersigned, declare that the information on this form is true and accurate.

Name (PLEASE PRINT): _____

Signature: _____ Date: _____