

**Registry Information for First Communion Candidates
St. Mary of Sorrows Religious Education**

Please return this completed form and attach a copy of the candidate's baptismal certificate at the time of registration (*If your child was baptized at St. Mary of Sorrows, we do not need a copy of the baptismal certificate, but a completed form is necessary to access the baptismal records*). This information will be used in your child's official sacramental record. Please make sure all information is complete and correct.

Please print clearly.

Name of Candidate (Last Name, First Name) _____

Place of birth (City, State, Country) _____ Date of Birth(mm/dd/yyyy) _____

Age at time of First Communion _____

Current Family Address _____ City/State/zip _____

Telephone number _____ Email Address _____

Father's Name (First name, Last name) _____

Mother's Maiden Name (First name, Last name) _____

Candidate's Date of Baptism _____ Church of Baptism _____

Full Address of Church of Baptism (incl. City/State/Zip/country)

Military Records No., if applicable (located on military baptismal certificate) _____