

**St Finbar's Parish-Based
Sacramental Program
Expressions of Interest for 2024**



Since the Sacramental Program is Parish based, priorities will be given to those children only who are members of the parish. If you are not from our Parish, please contact your Parish Priest for further information concerning the Sacramental program in your Parish.

Payment of \$30 per Sacrament per family is appreciated before the start of the sessions to cover the cost of materials. Payments can be made via the website www.stfinbars.org.au

Penance

Forms must be returned to St. Finbar's Parish as soon as possible.
Please use a separate form for each child.
Forms can be returned in person or scanned and emailed to secretary@stfinbars.org.au. We need to have the resources ready for your child. Your assistance is appreciated. Thank you.

Child's Name: _____

Please print above the full name of the child for whom this expression of interest is being made.

Date of Child's Birth: _____

Date of Baptism: _____

Place of Baptism: _____

Please ensure that if your child was not Baptized at St Finbar's that you obtain a Baptism certificate from the parish of Baptism.

School _____

Father's Name _____
(Or Carer's name)

Religion _____

Mother's Name _____
(Or Carer's name)

Religion _____

Address _____

Suburb _____

Postcode _____

Telephone Numbers: **Mother** _____

Father _____

E-mail _____

(Your privacy is respected; however, it would assist us if you would please supply at least one number for necessary contact)

Parent's/Carer's signature _____

Parent's/Carer's Signature _____

For Office use only
Entered into register _____

Register Number: _____

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Eucharist

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Child's Name: _____

Please print above the full name of the child for whom this expression of interest is being made.

Date of Child's Birth: _____

Date of Baptism: _____

Place of Baptism: _____

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School _____

Father's Name _____
(Or Carer's name)

Religion _____

Mother's Name _____
(Or Carer's name)

Religion _____

Address _____

Suburb _____

Postcode _____

Telephone Numbers: **Mother** _____

Father _____

E-mail _____

(Your privacy is respected; however, it would assist us if you would please supply at least one number for necessary contact)

Parent's/Carer's signature _____

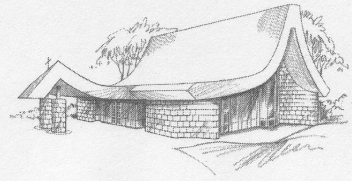
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saint + finbars



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Confirmation

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Child's Name: _____

Please print above the full name of the child for whom this expression of interest is being made.

Date of Child's Birth: _____

Date of Baptism: _____

Place of Baptism: _____

Saint's Name: _____

Sponsor's Name _____

Please ensure that if your child was not Baptized at St Finbar's that you obtain a Baptism certificate from the parish of Baptism.

School _____

Father's Name _____
(Or Carer's name)

Religion _____

Mother's Name _____
(Or Carer's name)

Religion _____

Address _____

Suburb _____

Postcode _____

Telephone Numbers: **Mother** _____

Father _____

E-mail _____

(Your privacy is respected; however, it would assist us if you would please supply at least one number for necessary contact)

Parent's/Carer's signature _____

Parent's/Carer's Signature _____

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Entered into register _____

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