

# Our Lady of Mt Carmel Parish

Serving Since 11 May, 1980  
Varroville, Raby, St Andrews and Bow Bowing



To know, love and serve Jesus  
by sharing our gifts through our baptismal mission

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## Enrolment Form for Sacramental Programmes First Reconciliation and First Holy Communion

Child's Surname: \_\_\_\_\_

Christian Names: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Class in 2016: \_\_\_\_\_

School Attending: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_  
(Mother's surname before marriage is required for the parish registers)

Date of Baptism: \_\_\_\_\_

Parish of Baptism: \_\_\_\_\_

Please supply a copy of *Child's Baptism Certificate*

Please indicate the Sacraments you are enrolling your child for:

**First Reconciliation** \_\_\_\_\_ Paid \$ \_\_\_\_\_ **First Holy Communion** \_\_\_\_\_ Paid \$ \_\_\_\_\_ Retreat \_\_\_\_\_

Other Special Notes: \_\_\_\_\_

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