

## ST. JOHN THE BAPTIST **ANNITSFORD**

## ROMAN CATHOLIC DIOCESE OF HEXHAM AND NEWCASTLE

## ST. BENET BISCOP PARTNERSHIP

## SACRAMENTS OF RECONCILIATION AND FIRST HOLY COMMUNION REQUEST FORM

Mother's Name Father's Name Family Address				Baptised Catholic YES / NO
				Baptised Catholic YES / NO
Post Code				
Home Phone Number (see Note				
Mobile Number (s)	,			
Email Address	(see Note 1)			
Name of School attending				
Class Year		•••••		
Home Parish				
HOHIE Fallsh		•••••	••••••••••••	
I would like the above Candidate to receive the Sacraments of Reconciliation and First Holy Communion and I / we agree that I / we will attend the Reconciliation & First Holy Communion Preparation Course Meetings and to attend weekly Mass.				
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