

First Communion Registration

St. Roch's Roman Catholic Church
2889 Islington Avenue
Toronto, ON M9L 2T3
Tel: (416) 749-0328 Fax: (416) 749-0329
Email: strochschurch@hotmail.ca



Child's Information

First Name: Middle Name: Last Name:

Date of Birth:

Address:

City: Postal Code:

School: Grade:

Family Information

Mother's Name:

Father's Name:

Cell #:

Cell #:

Email:

Email:

Church Family Attends:

Medical Information:

Does your child suffer from any allergies: No Yes Specify:

Does your child require an EpiPen: No Yes

Does your child have any special needs:

Child's Baptism Date: Church:

- My son/daughter was baptized in the Roman Catholic Church (Please attach a copy of certificate)
- My son/daughter was baptized in another Denomination - Specify:
- My son/daughter is not baptized
- I would be interested in having my son/daughter baptized or recieved into the Roman Catholic Church