

Baptism details: Where was your child baptised?

Name of Church + town _____

Date of baptism: _____

DECLARATION

I am willing to support and encourage my child throughout the preparation programme. I will make every effort to attend Sunday Mass and the parents' meetings.

Signature of parent / guardian: _____

PLEASE RETURN COMPLETED FORMS TO FR EMMANUEL OGUNNAIKE via THE PARISH OFFICE (behind the Church to the left)

Getting to know your child.

Knowing which school your child attends will help us understand the amount of Catholic RE curriculum they are being taught and whether your child may need additional Catholic resources and support.

To ensure appropriate level of safety and support we need to know if your child has any health concerns, allergies or educational.

Please do let us have any information that you feel would help us to best understand and get to know your child.

School attended

Allergies Yes / No details

Illnesses / disability

Medication _____

Special educational needs

Other useful information about my child

Contact details in case of emergency:

Contact 1 Name _____

Relationship to child _____Tel

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Contact 2 Name _____

Relationship to child _____Tel

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Data Protection: Forms and photographs concerning the First Holy Communion Children will be available only to the First Holy Communion Teachers and the Parish Priest.

I have supplied my mobile phone contact number and am happy to join a What’s App Group to aid communication.

Yes / No – please circle.

Edited: September 2023

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