

**St Paul Apostle Catholic Community
Endeavour Hills**

**First Reconciliation of Children
(Gr 3 & up)**

Registration/Census

Name of Student	
School <i>(tick applicable box)</i> <u>All students attending State Schools have to attend ASRE each Tuesday during School Terms</u>	<input type="checkbox"/> St. Paul Apostle North School <input type="checkbox"/> St. Paul Apostle South School <input type="checkbox"/> Tick & write name of School if not one of the above
Grade/Class	
Student's Country of Origin	
Home Address	
Telephone	Home Mobile
Have you (student) been baptised in the Catholic Church?	Date and Place of Baptism.....
Father's Name	Country of origin:..... Occupation: Religion:.....
Mother's Name	Country of Origin Occupation: Religion:.....
Volunteers Needed: Workshop Day <input type="checkbox"/> <i>(Tues 4/4/2006)</i> Sacrament Support <input type="checkbox"/> Parent Nights <input type="checkbox"/> <i>(Please indicate area you could help)</i>	Name:..... Phone No:.....

Office Use:
 Donation received: \$.....Date.....

Notes:

Parish Privacy Policy 2002: This information is for internal use only, and will not be handed to a third party.