



Our Lady of Lourdes Church

Waterloo, Ontario

First Reconciliation & First Eucharist Request

Dear Father Rafal Tomon:

I/we wish for my/our child to receive the sacraments of First Reconciliation and First Eucharist at Our Lady of Lourdes Church.

Date: _____

SECTION A – PLEASE PRINT

Child's name: _____

School: _____

Signature of parent/guardian

Signature of parent/guardian

SECTION B – PLEASE PRINT

Child's address	Postal code
Phone	Home email
Date of birth	
Current parish/place of worship	

Mother's full birth name	Religion
Contact information same as above <input type="checkbox"/> or	Address
	Phone
	Email

Father's name	Religion
Contact information same as above <input type="checkbox"/> or	Address
	Phone
	Email

Child's baptismal information

My/our child is baptized. (Please provide the baptismal information below. A copy of the Baptism certificate will be required if the child was baptized at a church other than Our Lady of Lourdes, Waterloo.)

My/our child is not baptized. Please contact me/us to discuss Baptism for my/our child.

Date of baptism	Religion
Place of baptism	Name of church
	Complete address

Additional information

Please provide any additional information that you think would be helpful.

Please return the completed form to the parish office.

Thank you.