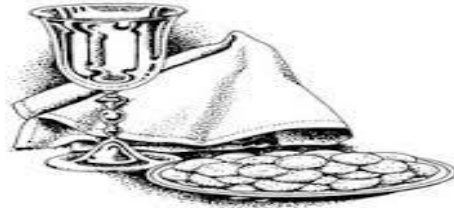


Last name \_\_\_\_\_

St. Kenneth Parish  
**First Communion Preparation**

2017-2018  
**2<sup>nd</sup> graders**



Mother's Name \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Father's Name \_\_\_\_\_ Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Home Address \_\_\_\_\_

Child #1 Full Name **(making First Communion)** \_\_\_\_\_

Parish in which baptism took place \_\_\_\_\_

Child #2 Full Name **(making First Communion)** \_\_\_\_\_

Parish in which baptism took place \_\_\_\_\_

**\*\*If your child was not baptized at St. Kenneth, please attach a copy of their baptismal certificate.**

**\*\*This form is for First Communion children ONLY, siblings are not to be listed.**

- **Tuition Information**

\$50 per child for program & materials  
(Make checks payable to St. Kenneth Faith Formation)

- **Important Information**

Your family must be registered in the parish.

**We must have a Baptismal Certificate on file before your child is able to make his/her First Communion.**

**Photo Permission;** I release St. Kenneth Parish of all liability and give my permission to have pictures of my family on the St. Kenneth website or in the church bulletin. (Names will not be used) Yes  No

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Office use only: Date \_\_\_\_\_ Amount Paid \_\_\_\_\_ Check/Cash \_\_\_\_\_