

FAMILY SURNAME



**St Mary MacKillop Catholic Parish Birkdale : Thorneside : Wellington Point**

# ENROLMENT FOR SACRAMENTAL JOURNEY

**Please return the completed form and copy of Baptism Certificate**

CANDIDATE(S) NAME(S)	Date of Birth	Baptism <i>(please provide a copy of the Baptism Certificate) Date &amp; Place of Church</i>		Current School	Class	Any other Sacraments Received (write details)
1.						
2.						
3.						

Home Address: ..... Postcode: .....

If one parent does not live at the home address, please circle which: .....**MOTHER** **FATHER**

<b><u>MOTHER</u></b> Name:	<b><u>FATHER</u></b> Name:
Maiden Name:	
Religion:	Religion:
Phone email	Phone email

### **FAMILY LAW MATTERS**

A copy of any Court Orders concerning residence arrangements for the Candidate, time spent by the Candidate with either parent, or parenting issues must be supplied with this Enrolment Form.

Are there any such Orders? **Yes/No**

Has a copy of every such Order been attached to this Enrolment Form? **Yes/No**

I hereby give my consent for the Candidate to be admitted to the Sacraments of the Catholic Church as indicated below:

- Baptism
  Penance
  Confirmation
  First Holy Communion

Father's Signature .....Date .....Mother's Signature .....Date.....

### **Privacy Collection Statement**

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We collect your personal information to fulfil the mission and directions of our organisation, to administer the sacraments and provide pastoral care to you, to provide you with other services and products you seek. We may disclose personal information about you to our parishes, schools and agencies and service providers who assist us in operating our organisation.