



St Benedict's Parish

Tallara Parkway

(PO Box 55)

Narrabundah ACT 2604

Phone: (02) 6295 7879

Fax: (02) 6260 6184

Email: narrabundah@cg.org.au

www.stbenedictsnarrabundah.com

SACRAMENT ENROLMENT FORM

FAMILY DETAILS (PLEASE PRINT)

CHILD'S SURNAME: _____

CHILD'S FIRST NAME: _____

MALE: FEMALE:

ADDRESS: _____

SUBURB: _____ POSTCODE: _____

SCHOOL: St Benedict's Primary School

DATE OF BIRTH: _____

DATE OF BAPTISM: _____

CERTIFICATE ATTACHED: YES/NO

SACRAMENTS TO BE RECEIVED IN 2017

RECONCILIATION

EUCCHARIST

CONFIRMATION

SACRAMENTS ALREADY RECEIVED:

- RECONCILIATION Year
 EUCCHARIST Year

MOTHER'S FIRST NAME: _____ SURNAME: _____

MAIDEN NAME: _____

CATHOLIC NON-CATHOLIC

HOME PHONE: _____ WORK PHONE: _____

MOBILE: _____

EMAIL: _____

(please print)

FATHER'S FIRST NAME: _____ SURNAME: _____

CATHOLIC NON-CATHOLIC

HOME PHONE: _____ WORK PHONE: _____

MOBILE: _____

EMAIL:

(please print)

There is a \$20 fee per sacrament for Reconciliation and Eucharist and a \$30 fee for Confirmation to cover the costs of certificates, stoles (Confirmation only), books and general administration.

Please find enclosed my cheque for \$

or

St Benedict's Parish
BSB: 062 786
Account Number: 0000 14992
Reference: Sac Enrol – surname of your child.

Or

Debit my: Visa Bankcard Mastercard (please tick)

Card No: _ _ _ _ _ _ _ _ _ _ **Expiry date:** _ _ / _ _
_ _

Cardholder Name:

Address: