

# IMMACULATE CONCEPTION PARISH - ELLERSLIE

Enrolment form for the Sacraments of First Reconciliation,  
Confirmation and First Holy Communion 2020

Candidate's Name:

Date of Birth:

Mother's Name:

Father's Name:

Address:

Phone number:

Email address:

Date Baptised:  
(please attach copy of baptism certificate)

Confirmation Name:

Sponsor's Name:

## PLEASE NOTE:

- **ALL INFORMATION IS REQUIRED FOR THE PARISH REGISTER SO PLEASE MAKE SURE ALL BLANKS ARE FILLED IN.**
- **INCOMPLETE ENROLMENT FORM WILL NOT BE ACCEPTED.**
- **NO LATE ENROLMENT ACCEPTED**
- **RETURN ENROLMENT FORM BEFORE 31<sup>st</sup> JANUARY 2020**  
by email ( [icparishellerslie@gmail.com](mailto:icparishellerslie@gmail.com) attention to Lourdes), hand at the Parish Office or post to: Parish Priest; Immaculate Conception Parish;  
66 Main Highway, Ellerslie 1051