

**HOLY CROSS PENANCE AND FIRST COMMUNION
INFORMATION SHEET**

PLEASE PRINT CAREFULLY.

(THIS FORM WILL BE USED TO PRINT OUT THE SACRAMENTAL DOCUMENTS)

Child's FIRST Name

Child's LAST Name

Street Address

City, State, Zip Code

Phone Number

Date of Birth: _____

E-mail address: _____

Place of Baptism

Date of Baptism

Address of Church where child was baptized

Holy Cross Parishioner? Y / N **If no, what parish do you belong?** _____

CHILD'SCHOOL: (check one): **Holy Cross** _____ **PREP:** _____ **Private:** _____

Name of School if other than Holy Cross: _____

Father's Name

Mother's Name

Mother's Maiden Name

Penance and First Communion Fee: \$20.00

\$20 Fee paid _____ **Check no.** _____ **(no cash please)**

Please return by November 11, 2019