

Church of 'Our Lady Help of Christians'

NAVAN ROAD PARISH, DUBLIN 7



Registration Form for First Holy Communion And First Reconciliation 2025

Information is for Parish Sacramental Preparation and will not be disclosed to any third party all information will be deleted from parish records after the ceremony

| Child's Name First Names and Surname AS ON BIRTH CERT | | | | | | |
|---|---|----------------|---|--|--------------|---------------|
| Child's Date of Birth | | | Please en | f Baptism nclose a copy of mal Certificate | | |
| Child's School Please tick | Mary Help of Christians Girls National School | | Saint John Bosco's Senior Boys National School | | | |
| Child's Class Please tick under Teacher's Name | Ms. O'Connor | Ms. McShane | Mr. Deegan | Ms. Laughlin | Ms. Quinn | Ms. Temple |
| Parents / Guardian Names in BLOCK CAPITALS | Parent 1 | | | Parent 2 (Optional) | | |
| Parents / Guardian Signatures | Parent 1 | | | Parent 2 | | |
| ADDRESS | | | | | | |
| | | | | | | |
| Email Addresses | | | | | | |
| Mobile No.s | | | | | | |
| Please pro | ovide a copy | of child's Bap | otismal Certi | ficate (Cathol | ic) 🗆 | |
| Your €10 (If paid online throu | | | • | paration expe | | |
| | | | | | | P T O |

Parish Office: Telephone 01-8380265 Email: info@navanroadparish.com

The Family Mass team will be asking for participation in the First Holy Communion Preparation Masses each month.

| Do you wish your child to be cons | idered for | | | | |
|---|------------|--|--|--|--|
| Reading Prayers of the Faithful. | | | | | |
| Bringing the Gifts to the Altar. \square | | | | | |
| | | | | | |
| Would you as a parent consider | | | | | |
| Reading at The Liturgy of the Woods (Short child friendly readings) | ord | | | | |
| Reading: Welcome or | | | | | |
| After Communion Reflection | | | | | |
| Helping Family Mass Team | | | | | |
| (Once a month) | | | | | |
| | | | | | |

Email: nrfamilymass@gmail.com for information on Family Mass

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