

**APPLICATION FOR FIRST RECONCILIATION AND  
FIRST HOLY COMMUNION 2022/2023**

**PLEASE PRINT CLEARLY IN BLOCK CAPITALS**

Names of parents	
Name of Child: _____	Surname of Child
Baptised at:	Church
On _____	by _____
<b>(Baptism Certificate must be supplied)</b>	
Home Address: _____	
Ph Nos:	Mob No
Email:	
Date of birth:	School:

I <input type="checkbox"/> OR We * <input type="checkbox"/> attend Mass <u>weekly</u> at St Marks <input type="checkbox"/> OR St Edward's * <input type="checkbox"/> (please select)	
I <input type="checkbox"/> OR We* <input type="checkbox"/> would like _____ <i>*name of child</i>	
to make HIS <input type="checkbox"/> OR HER <input type="checkbox"/> First Reconciliation and First Holy Communion in 2022/2023.	
Signed _____	Name _____

**Please complete this form online and email it as an attachment to  
[fhc@catholicwindsor.org](mailto:fhc@catholicwindsor.org)**

**GDPR Information**

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