



St Mark's Parish

33 Tranmere Street Drummoyne NSW 2047 Australia
Tel: (02) 9181 1795 Email: yc@stmarksdrummoyne.org.au

2024 FIRST HOLY COMMUNION ENROLMENT FORM

**PLEASE COMPLETE USING BLOCK LETTERS
RETURN THIS FORM TO THE PARISH OFFICE by Friday 3 May 2024**

CHILD'S DETAILS

Child's Full Name		Gender:	Male / Female
Place of Birth		Date of Birth:	
School Attended		Grade:	
BAPTISM & 1st Reconciliation If your child was not Baptised or completed their 1 st Reconciliation at St Mark's Drummoyne, please supply a copy of their Baptism Certificate and their 1 st Reconciliation Certificate.			

PARENT'S DETAILS

Father's Full Name		Religion	
Address			
Email		Mobile	
Mother's Full Name		Religion	
Address			
Email		Mobile	

All Sacramental correspondence will be sent to the emails provided

Do you attend Mass weekly at St Mark's? Yes No

If Yes, which Mass(es)? **Sat 5:30pm** **Sun 9am** **Sun 6pm**

If No, please state which Parish you worship regularly at _____

Are you registered to contribute to our weekly planned giving envelopes? Yes No

To contribute, please contact the Parish Office to register.

COMMITMENT TO THE FIRST HOLY COMMUNION

(*To be read, discussed, and signed by the candidate and both parents/guardians)

Parents / Guardians

I/we understand that completion of the full Sacramental preparation program is required for my child to receive the Sacrament.

Please tick to indicate your acknowledgement of participation.

- I/we would like my child to begin preparation for First Holy Communion
 I/we will attend Mass and all Preparation sessions.

I / We _____ parent, and my child _____
Understand that we are making a commitment to attend all preparatory sessions and that failure to attend will result in my child not being able to make the Sacrament.

If there are any issues/difficulties with meeting the above requirements, please make an appointment to see **Fr Michael McLean**.

For all enquiries, please contact the **Parish Office** at yc@stmarksdrummoyne.org.au or on **9181 1795**.

--	--	--

*Candidate's Signature

*Mother's Signature

*Father's Signature

Date: _____ Date: _____ Date: _____

Please return the completed form

with a copy of the Baptism Certificate and 1st Reconciliation Certificate
(only required if the Sacrament did not take place at St Mark's Drummoyne)

A Photocopy is acceptable.

Parish Office: **33 Tranmere Street Drummoyne NSW 2047** or

Email: yc@stmarksdrummoyne.org.au

Office Use Only

- Registration Form and payment received
 Baptism/1st Reconciliation Certificate attached
 Consent Form

Program Cost:	\$50
Date:	
Ceremony confirmed:	

Payment can be made by Card on Parish Website

<https://www.bpoint.com.au/payments/drummoyneparish>

select from the dropdown BillerCode 1400838 or leave payment with completed form at Parish Office in letterbox.



CHILD CONSENT

Name of child: _____

Address: _____

State: NSW: Age: _____

Parish: St Mark's Parish Drummoyne Priest: Father Michael McLean PP EV

I, _____ **[name of parent/guardian]**, of the above-mentioned child, authorise St Mark's Parish, Drummoyne and/or its approved nominees to use any reproductions or adaptations of the child/children's likeness ('the material'), either in full or part, in conjunction with any wording or drawings, in any St Mark's Parish publication, production and presentation, including electronic publications:

- | | | |
|---------------------------------------|------------------------------|-----------------------------|
| Photographs, video or sound recording | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Parish Bulletin | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Zoom Sessions | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| St Mark's Parish Website | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Facebook | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Email | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Note: children will only be identified by first name and initial of surname

I acknowledge that neither I/we nor the abovementioned child have any commercial rights in any St Mark's Parish publication, production or presentation which includes the material.

The Parish will not provide this material to any third party.

This consent form will be placed in the Parish Office Safeguarding file at St Mark's Parish.

Signature of Parent / Guardian

Date

ATTENDANCE AT THE FOLLOWING IS EXPECTED:

Sunday 12 May at 9:00am - Year 3 Family Mass

and

**18th/19th May - Presentation of Candidates
(Saturday Vigil or Sunday Mass at St Mark's)**

PLEASE INDICATE THE SESSION YOU WANT TO ATTEND

PARENT ONLY INFORMATION EVENING IN ST MARK'S CHURCH	
Attendance is Essential <i>(at least one parent or guardian. Children not required)</i> Thursday 16 May @ 7:00pm	
4 PREPARATION SESSIONS IN ST MARK'S CHURCH	
<input type="checkbox"/> Tuesdays 21, 28 May, 4 & 11 June @ 6:00pm <input type="checkbox"/> Wednesdays 22, 29 May, 5 & 12 June @ 6:00pm <input type="checkbox"/> Thursdays 23, 30 May, 6 & 13 June @ 6:00pm	
PRAYER AND PRACTICE EVENING IN ST MARK'S CHURCH	
Attendance is Essential Wednesday 19 June @ 6:00pm	
CELEBRATION MASS FOR FIRST HOLY COMMUNION NUMBER YOUR PREFERENCES 1 TO 4 <i>The number of Candidates per Celebration Masses are limited and will be reserved on a 'first come, first serve' basis.</i>	
Saturday 5:30pm <input type="checkbox"/> 22 June <input type="checkbox"/> 29 June	Sunday 9:00am <input type="checkbox"/> 23 June <input type="checkbox"/> 30 June
ST MARK'S PARISH MASS SCHEDULE	
Weekday Masses	Sunday Masses
Monday & Friday – 8:00am Tuesday & Thursday – 9:30am Wednesday – 7:30am Saturday – 12:00pm (noon) 11:00am-11:55am Adoration and Reconciliation	Saturday Vigil – 5:30pm Sunday – 9:00am & 6:00pm

Please **KEEP** a note of these dates in your diary
A parent or guardian must attend all sessions