

Holy Communion Preparation Programme 2025

Application Form

Name	
Date of Birth	
Place/Date of Baptism	
Address	
Contact Phone Number	
Email contact	
School	
<p>Please ensure that this form is signed by a parent or guardian:</p> <p>I, _____ hereby agree that our Son/Daughter _____ has permission to take part in the preparation programme and I understand that the details given on this form are subject to GDPR regulations and will only be used for the purpose intended which will include entering details in the parish Sacramental Registers.</p>	
Date:	
Signature	
Comments/Questions	