

Please fill out the following form and return it to Anna **NO LATER THAN Wed, Nov 15**. We need these records in order for your child to receive the sacraments of First Reconciliation and First Communion.

If your child was baptized in Ashland, Dauby, Moquah or Ino we do not need a copy of their Baptism Certificate, but **if they were baptized at St. Mary's in Odanah or in another city, you will need to provide a copy of their baptismal certificate** BEFORE they receive First Reconciliation.

Thank you!

BAPTISM INFORMATION

First Reconciliation & First Communion

CHILD'S NAME:

(First)

(Middle)

(Last)

FATHER'S NAME:

(First)

(Middle)

(Last)

MOTHER'S NAME:

(First)

(Middle)

(Last)

DATE OF BIRTH: _____ **CITY OF BIRTH:** _____

DATE OF BAPTISM: _____

PLACE OF BAPTISM: CHURCH NAME _____

ADDRESS _____

CITY, STATE, ZIP _____