Most Holy Trinity Parish

First Reconciliation & First Communion

Registration 2026 – 2027

This form helps ensure that we have the correct information for your child's reception of the sacraments and official recording in the sacramental registrar.

Parent/Guardian Information

Father's Full Name: _____

Mother's Full Name: _____

Mother's Maiden Name: _____

Address: _____City: _____Zip:_____

Father's Phone: _____Email address: _____

Mother's Phone: _____Email address: _____

Emergency Contact Name: _____Phone: _____

Child Information

Child's First/Last Name: _____Middle _____

Birth Date: _____ Age: _____ Grade Level: (2026/2027) _____

Place of Birth: _____

Baptism Information (Fill out only if not baptized at Most Holy Trinity, Fowler)

Child's Church of Baptism: _____

Address of Church Baptized: _____

Date of Baptism: _____

Godparents: _____

Important: If Baptism did NOT take place at Most Holy Trinity, Fowler, please attach a copy of your child's Baptismal Certificate to this form.