

**IMMACULATE CONCEPTION CATHOLIC CHURCH  
REGISTRATION FOR CELEBRATION OF SACRAMENTS  
2011-2012**

Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Name of School \_\_\_\_\_ Grade \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Primary Residence \_\_\_\_\_  
(Street Address) (City) (State/Zip)

Home Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Date of Baptism \_\_\_\_\_

Place of Baptism \_\_\_\_\_  
(Name of Church)

\_\_\_\_\_  
(Street Address of Church)

\_\_\_\_\_  
(City/State/Zip)

**We will need a copy of your child's baptismal certificate if not baptized at ICC. If you do not have a copy, one can be obtained from the office of the church where he/she was baptized. If you need help obtaining this certificate, the Sacramental Preparation Team will be happy to assist you.**

**Please complete this form and return it to church office with registration fee of \$25.00. Please make checks payable to: IMMACULATE CONCEPTION CATHOLIC CHURCH.**

For Office Use Only

Fee Paid \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_

Parent/Child Meetings:

Sept 25\_\_ Oct 5\_\_ Oct 12\_\_ Oct 19\_\_ Oct 26\_\_ Nov 9\_\_ Nov 16\_\_ Nov 19 (Reconciliation)

Feb 1\_\_ Feb 8\_\_ Feb 15\_\_ Feb 29\_\_ Mar 7\_\_ Mar 14\_\_ Mar 21\_\_ (1st Eucharist)

Rehearsal Friday Apr 13 5:00\_\_\_\_ 5:30\_\_\_\_ 6:00\_\_\_\_

Celebration: Sat. 5:30 p. m. Apr 14\_\_\_\_ Sun. Apr 15 8:30\_\_ Sun. April 15, 11:00\_\_\_\_

Additional comments

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