

# St. Vincent Basilica Parish First Reconciliation and Eucharist Preparation Registration Form 2018-2019

300 Fraser Purchase Road, Latrobe, PA 15650  
Please complete both sides of this form.

Name: \_\_\_\_\_  
                    First                      Middle                      Last                      Age

School Attending \_\_\_\_\_ Grade \_\_\_\_\_ Birthdate \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other: \_\_\_\_\_

Was your child Baptized in a Catholic Church? \_\_\_\_ if no, what denomination was the Church \_\_\_\_\_

City of Birth \_\_\_\_\_ Church of Baptism \_\_\_\_\_

Address of Church: \_\_\_\_\_

Home Parish \_\_\_\_\_ Please submit a copy of the baptismal certificate.

Is there something we should know about your child?

## MOTHER'S INFORMATION

Address same as child's? Yes \_\_\_\_ No \_\_\_\_

Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Religion: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## FATHER'S INFORMATION

Address same as child's? Yes \_\_\_\_ No \_\_\_\_

Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**EMERGENCY AND MEDICAL INFORMATION** - In the event of an emergency, your child will be released to a responsible person as designated by you if you are unavailable.

Persons beside yourself to contact in the event of an emergency:

1. \_\_\_\_\_  
Name Phone number relationship

2. \_\_\_\_\_  
Name Phone number relationship

Allergies/Health Conditions

\_\_\_\_\_  
\_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Turn the page over.

Family Name: \_\_\_\_\_

## PHOTOGRAPHIC & VIDEO RELEASE

A parent/guardian signature is necessary if the subject is under age eighteen.

I hereby grant to the Diocese of Greensburg, Pennsylvania, and its respective licensees, successors and assigns, the right and permission, with respect to those photographs and video taken of me or the minor named below on whose behalf I am signing, and with respect to any printed or electronic matter in connection therewith, to do the following:

1. To include such photographs on the Saint Vincent Basilica Parish website
2. To use my name or the name of the minor on whose behalf I am signing, in connection with the foregoing.

I hereby release, discharge and agree to indemnify and hold harmless the Diocese of Greensburg and its legal representatives, licensees, successor and assigns, from all claims and demands whatsoever arising out of or in connection with the foregoing, and waive any right to inspect or approve the same.

Signature of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Subject of Photograph (if over 18 years of age) \_\_\_\_\_

Printed Name and Address \_\_\_\_\_

I hereby certify that I am the *[parent and/or guardian]* of \_\_\_\_\_, a minor under the age of eighteen years, and hereby consent on behalf of said minor to the use of any of the photographs taken of said minor pursuant to the terms set forth in this Photographic Release, including, without limitation, the release, discharge and hold harmless provisions thereof.

**SACRAMENTAL PREPARATION MATERIAL FEE: \$20.00 PER CHILD TO BE INCLUDED WHEN THE REGISTRATION IS SUBMITTED. MAKE CHECKS PAYABLE TO: St. Vincent Basilica Parish. This will help to defray the cost of the Sacramental Preparation Family Packets and First Communion Banner Kit.**

**In the case of financial hardship, please contact Mrs. Bridget DiVittis at 724-539-8629 x16. No child will be denied participation in the formation process because of financial difficulties. Please let us know how we can help!**