

**Goulburn Mission**



**Office:** Parish Centre  
36 Verner St  
Goulburn@cg.org.au  
PO Box 11  
Goulburn  
NSW 2580  
ph: 02 6299863

<http://cg.org.au/goulburn/Home.aspx>

Office Hours: Mon- Fri 8.30-12.30pm

**SACRAMENT ENROLMENT 2020**

**SACRAMENTAL ENROLMENT FORM (please print clearly)**

**SURNAME:** \_\_\_\_\_

**CHRISTIAN NAMES:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

**PHONE NO.:** \_\_\_\_\_ **Mobil:** \_\_\_\_\_

**EMAIL: \*** \_\_\_\_\_

**SCHOOL:** \_\_\_\_\_ **CLASS:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**DATE OF BAPTISM:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Certificate Sighted Yes/No**  
**(Office Use Only)**

**PARISH OF BAPTISM:** \_\_\_\_\_

*If you do not have a copy of the Baptism certificate please contact the parish where Baptised and request one.*

*Goulburn churches are on record here – please note which Church.*

**PARENT/GUARDIAN DETAILS**

**FATHER'S FULL NAME:** \_\_\_\_\_ **Religion** \_\_\_\_\_

**MOTHER'S FULL NAME:** \_\_\_\_\_ **Religion** \_\_\_\_\_

**MAIDEN NAME:** \_\_\_\_\_

**I WISH TO ENROL FOR THE SACRAMENT OF:** (please circle)

Reconciliation Yr 3

First Holy Communion Yr 4

Confirmation Yr6-7

Signed.....Parent/Guardian

Payment Cash/ chq/ef  
\$50 Reconciliation  
\$50 Holy Communion  
\$70 Confirmation

Received Y/N  
Received Y/N  
Received Y/N

## **Questions you may have:**

### ***How does the preparation run?***

Basically, it will only work with your support, in helping your child to complete the workbook at home and in bringing your child to take part in classes, and by attending our Sunday Masses.

### ***How do I Register my child***

You need to complete the above registration form with payment to the Parish office, or email scanned paperwork to [mqa.sacramental@gmail.com](mailto:mqa.sacramental@gmail.com)

BY **5 February 2020 ( for all 3 sacraments- )**

Reconciliation, Holy Communion & Confirmation

### **No enrolments accepted after this date.**

Complete the Enrolment form –

- and return to the Parish office
- email enrolment and credit card form or

EFT BSB 062 786 ACC 000014927

Ref: surname/SAC

(please email receipt to [goulburn@cg.org.au](mailto:goulburn@cg.org.au))

- Post to parish office
- Call into parish office- if paying by cash.

### ***IMPORTANT!***

You will also need to provide a photocopy of your child's Baptism certificate with the enrolment form.

If your child was Baptised in this parish – we still require the date of Baptism and the Church they were Baptised in.

If you do not have a copy of the Baptism Certificate, please contact the Parish secretary of the relevant parish to arrange a copy.

### **To continue:**

Please check the dates and the Sacrament preparation dates your child will need to attend before committing, dates are on the Parish website

*If you are not available to commit to attending classes and Masses over the weeks for the preparation you are welcome to enrol next year (around the same time) and continue with your Sacramental preparation.*

*Please contact the Parish office for any questions*

*Regards*

*Sharon Cashman*

*Parish Secretary*

*02 62399863*

MARY QUEEN OF APOSTLES PARISH  
THE GOULBURN MISSION

36 VERNER ST (PO BOX 11)

Tel: 02 62399863

EMAIL: [goulburn@cg.org.au](mailto:goulburn@cg.org.au)

**CREDIT CARD PAYMENT**

Payment for Sacrament / Childs name \_\_\_\_\_

I request and authorise Mary Queen of Apostles Parish to arrange funds to be debited from my nominated credit card as detailed below:

NAME ON CARD: \_\_\_\_\_

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRY DATE: \_\_\_\_\_

CV NUMBER: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

Please note that your details will be held in the strictest of confidence and will be destroyed once loaded on the Bpoint System which forms part of the Commonwealth Bank.

SIGNATURE ON CARD: \_\_\_\_\_

DATE: \_\_\_\_\_

EMAIL FOR RECEIPT PURPOSE:

\_\_\_\_\_