



ST. TIMOTHY CATHOLIC CHURCH

21 Leith Hill Road
Toronto, ON M2J 1Y9
Tel: (416) 494 6526

<https://sttimothy.archtoronto.org> Email: sttimothyto@archtoronto.org

Year 2022 FIRST HOLY COMMUNION Registration Forms for Catholic Schools

Before completing the attached registration, please ensure that:

- Your child is baptized in the CATHOLIC faith
- You have attached a **PHOTOCOPY** of your child's baptism certificate even ***if your child was baptized at St. Timothy Catholic Church***

If you have any concerns about the above requirements, please contact Chris Elliott, Youth Minister, at Tel # 416 494 6526 ext. 302 or via email at celliott@archtoronto.org as soon as possible.

The fee for First Communion may be made in cash or cheque, payable to St. Timothy Catholic Church):

- **Catholic School Board Students: \$50.00**

Please **complete** the attached registration forms and email directly to celliott@archtoronto.org

Important Notice for Children Baptized in an Eastern Rite Catholic Church

Please check your child's baptismal certificate to verify if your child has **already received first communion at baptism**. If so, we are willing to have them participate with their classmates who are receiving for the first time, provided you complete and submit the registration form along with a copy of his/her baptismal certificate.

Examples of churches administrating confirmation at baptism:

- Chaldean Catholic
- Greek Catholic
- Ukrainian Catholic
- Armenian Church
- Syrian Church
- Maronite Church
- Melkite Church



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Photocopy of Baptismal Certificate

\$50.⁰⁰ Cash/Cheque

(Payable to *St. Timothy Catholic Church*)

NAME OF SCHOOL

<input type="text"/>	<input type="text"/>	<input type="text"/>
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CHILD'S FIRST NAME*

CHILD'S MIDDLE NAME*

CHILD'S LAST NAME*

*PLEASE PROVIDE FULL NAME AS IT APPEARS ON BAPTISM CERTIFICATE

<input type="text"/>	<input type="text"/>
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DATE OF BIRTH (DD/MM/YYYY)

DATE OF BAPTISM (DD/MM/YYYY)

<input type="text"/>	<input type="text"/>
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CHURCH OF BAPTISM

CITY/COUNTRY

<input type="text"/>	<input type="text"/>
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FATHER'S FIRST & LAST NAME

MOTHER'S FIRST & MAIDEN NAME

<input type="text"/>	<input type="text"/>	<input type="text"/>
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HOME ADDRESS

CITY

POSTAL CODE

<input type="text"/>	<input type="text"/>
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HOME/CELL PHONE NUMBER

EMAIL ADDRESS

Declaration of Intent and Acknowledgement of Commitment

It is my/our intention that my/our child receives the Sacraments of First Reconciliation and First Holy Communion in the community of St. Timothy's Church. I/We acknowledge our responsibility to journey with him/her at home and commit to support him/her in the best way during and after this preparation. As parent(s)/guardian(s) I/we recognize that the best way of accomplishing this obligation is by faithful attendance at Sunday Eucharist.

SIGNATURE OF CANDIDATE

DATE

SIGNATURE OF PARENT/GUARDIAN