



**First Reconciliation/First Eucharist  
Registration Form  
2018-2019**

**St. Jerome Catholic Church  
116 Denbigh Boulevard  
Newport News, VA 23608  
757-877-3771**

**(please print)**

**Name** \_\_\_\_\_

**Fathers Name** \_\_\_\_\_

**Mother's Name** \_\_\_\_\_ **Maiden Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**[Phone** \_\_\_\_\_ **Cell** \_\_\_\_\_

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

**Birthdate** \_\_\_\_\_ **Place of Birth** \_\_\_\_\_

**(over)**

**Baptised** \_\_\_\_\_ **Date Baptised** \_\_\_\_\_

**Church Baptised** \_\_\_\_\_

**SPECIAL INFORMATION (I.E. ALLERGIES, MEDICATIONS,  
DIETARY RESTRICTIONS, ETC)**

\_\_\_\_\_

**EMERGENCY Contact: (PERSONS WHO MAY PICK YOUR CHILD  
UP FROM CLASS)**

\_\_\_\_\_

**RELEASE OF LIABILITY AND MEDICAL.**

**Parent/Guardian Signature** \_\_\_\_\_

**PHOTO RELEASE: Consent for St Jerome to use photo and  
likeness for publication on website, parish bulletins, Facebook,  
and other forms of social media for church related purposes.**

\_\_\_\_\_**YES I give my consent** \_\_\_\_\_**NO I do not give consent.**

**Parent/Guardian Signature** \_\_\_\_\_

**First Reconciliation/ First Eucharist fee \$70.00**