

**ST. MARY'S VISITATION PARISH  
FIRST RECONCILIATION AND FIRST EUCHARIST  
REGISTRATION FORM 2019-20**

Child's full name: \_\_\_\_\_  
(first) (middle) (last)

Birth Date: \_\_\_\_\_

Father's full name: \_\_\_\_\_

Mother's full **maiden** name: \_\_\_\_\_

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

Address: \_\_\_\_\_

Member of: St. Mary's Visitation \_\_\_\_\_ Other \_\_\_\_\_

**Baptismal Certificate:**

Please provide a copy of your child's baptismal certificate. If you cannot find a copy of your child's certificate, please contact the parish where he/she was baptized and ask them to mail, fax (262.782.0677) or scan and email ([ckinzy@stmaryeg.org](mailto:ckinzy@stmaryeg.org)) a copy to St. Mary's Visitation Parish. If your child was baptized at St. Mary's Visitation, we can look up his/her baptismal record. Please indicate the month and year he/she was baptized:

My child was baptized at St. Mary's in \_\_\_\_\_  
(month/year)

**Fee: \$55 per child for the Sacramental year** (Please contact Elizabeth Harrison if you need financial assistance) (262) 782-4575 x108 or [eharrison@stmaryeg.org](mailto:eharrison@stmaryeg.org)

**Mail or drop-off registration form, baptismal certificate and payment to:**

St. Mary's Visitation Parish  
Attn: Chris Kinzy  
1260 Church Street  
Elm Grove, WI 53122

***Registration due before August 30<sup>th</sup>, 2019***

*Office use only:*

Date \_\_\_\_\_ Amount Paid \_\_\_\_\_ CK# \_\_\_\_\_ Cash \_\_\_\_\_

Time \_\_\_\_\_