



St. John Vianney Catholic Church & School
445 82nd Ave. · St. Pete Beach, FL 33706
727.360.1147 · www.stjohnsparish.org



FIRST COMMUNION & RECONCILIATION REGISTRATION

PLEASE RETURN THIS FORM, **ALONG WITH A BAPTISM CERTIFICATE***,
TO THE PARISH OR

Information on this form is held in confidence and is not shared without your permission.

STUDENT INFORMATION

Student Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State/Zip)

Is Student enrolled in St. John's School? Other Catholic School? Student's Grade _____

Family Faith Formation & CCD? (Required if not enrolled in Catholic School)

***The following additional document is required:**

Baptism certificate: Name of Church of Baptism _____

City, State _____ If not at St. John's, submit a copy.

FAMILY INFORMATION

Mother: _____
(Last) (First) (MAIDEN) (Signature)

Mother's Email: _____ Phone: _____ Is Mother Catholic? _____

Father: _____
(Last) (First) (MI) (Signature)

Father's Email: _____ Phone: _____ Is Father Catholic? _____

If a parent or guardian has sole custody, the section of the court document **indicating the parent who has sole custody in all decision making** must be submitted. Please indicate if a parent is deceased. Otherwise both parents **must** sign this form.

Are you a registered St. John's parishioner? _____ Parish Envelope # _____

Material's Fee is \$35 See payment instructions on page 2.

ACKNOWLEDGEMENTS

1. My signature below indicates my awareness of **Safe Environment** data as well as policies regarding Religious Education that are available to me. (The link to *Promise to Protect, Pledge to Heal*, for the Office of Safe Environment, is available from our website, www.stjohnsparish.org.)
2. From time to time, **publicity material** for the parish bulletin and other media may be prepared about events sponsored by St. John Vianney Catholic Church. This material may or may not be accompanied by photos or videotape of students. The release may be prepared by St. John Vianney Parish or a media representative.

I DO **DO NOT** give permission for my child's name and likeness to be included in such publicity releases. If not, please ensure your child does not stand with the group photo.

Parent/Guardian Signature	Print Name	Date
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Parent/Guardian Signature	Print Name	Date

(Please indicate if a parent is deceased. Otherwise both parents **must** sign this form.)

INSTRUCTIONS

- Step 1. Fill out this form online and email as follows:
 If child does **not** attend St. John's School:
 Email fboyle@sjvcc.org (electronic signature) **-or-** mail/drop off at
 St. John Vianney Catholic Church, 445 82nd Ave., St. Pete Beach, FL 33706.
- If child attends St. John's School:
 Email: mrivera@svcc.org **-or-** mail/drop off at
 St John's School, 500 84th Ave., St. Pete Beach, FL 33706
- Step 2. Mail/drop off at the Parish Office, the Baptism Certificate to Frank Boyle
- Step 3. Make payment: WeShare (Electronic check/credit/debit)
 www.stjohnsparish.weshareonline.org
 -or- mail/drop a check or cash at the office, see above.

***** Office Use Only *****

Baptism Certificate _____ Church of Baptism Notified _____