



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](http://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.

Parent/Guardian Signature	Print Name	Date
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](mailto:fboyle@sjvcc.org) (electronic signature) **-or-** mail/drop off at  
                         St. John Vianney Catholic Church, 445 82<sup>nd</sup> Ave., St. Pete Beach, FL 33706.
- If child attends St. John's School:  
                         Email: [mrivera@svcc.org](mailto:mrivera@svcc.org) **-or-** mail/drop off at  
                         St John's School, 500 84<sup>th</sup> 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](http://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 \_\_\_\_\_