



Our Lady of the Valley

Catholic Parish, Gatton Laidley

Parish Office:

Phone: 07 5465 3131

Address: 37 John Street South, Laidley 4341

Postal: PO Box 6, Gatton 4343

Email: gatton@bne.catholic.net.au

Web: www.olv.org.au

APPLICATION FOR SACRAMENTAL PREPARATION – PRIMARY SCHOOL CHILDREN 2019

NAME OF CHILD:

We welcome your child and family to the 2019 Sacramental Journey; it is an important part of their life journey, and our parish community will be prayerfully supporting you throughout the year.

At any time you have a query or require more information, please see Father Noy or contact the office.

ELIGIBILITY FOR ENROLMENT:

Please indicate that your child meets the following eligibility requirements:

1. Your family are parishioners of Our Lady of the Valley Parish Gatton Laidley
2. Your child is in year 3,4 or 5 in 2019 (please contact us for other year groups)
3. At least one parent is a confirmed Catholic
4. The child is baptised
5. Copies of the Child's Birth and Baptism Certificate are attached or have been previously provided
6. **Both parents** (listed on the Birth Certificate) have signed the Consent Form on page3 and any documents required on page 3 are attached
7. Provide a digital photo – email to gatton@bne.catholic.net.au for promotional use.
By providing this photo, you are providing your consent for this photo to be used.
8. Payment made by cash, bank transfer or credit card
Confirmation \$ 50, Eucharist \$ 50, Penance \$ 30 or Package for all 3 \$ 100

Bank details: EFT only – not at bank BSB::064 786 Account: 5244 40103

Please include your child's name as the reference

Credit Card: Name on Card:

Card Number:/// Expiry Date:/

9. All information returned to Parish Office by Wednesday 13th March

Parent Statement:

- I wish to apply for my child (*whose name appears on this document*) to undertake the Sacramental Preparation Journey in Our Lady of the Valley Parish
- I understand that completion of this program is necessary for the reception of the Sacraments of Confirmation, Eucharist and Penance.

Parent Signature: **Date:**//

SUBMISSION OF APPLICATION:

This application must be submitted with all necessary documentation to reach the Parish Office **no later than Wednesday 13th March 2019.**

PARENT INFORMATION EVENING:

The Parent Information Evening is on Wednesday 13th March at St Mary's Church Gatton commencing at 6:00pm. This evening will outline the process, dates and required commitment of the 2019 Sacramental Journey.

Child's Christian Names: First Middle

Child's Surname: Preferred First Name

Child's Date of Birth:/...../..... Place: Sex: Male/ Female

Baptism: Has your child been baptised in a Catholic or other Christian Church? Yes / No

Date of Baptism:/...../..... Denomination:

Church Name: Place:

Current School: Year at School:

Note: If your child is in year 6 or older in 2019, contact Father Noy to discuss preparation arrangements for older children.

Father's Full Name: First Middle Surname

Mother's Full Name: First Middle Surname Maiden Name

Parent's Religion: Father Catholic Non-Catholic Mother Catholic Non-Catholic

Parent's Contact Numbers: Home Father Mobile Mother mobile

Email Address: Essential as all group contact will be made by email Please print clearly

Email 1:

Email 2: (optional)

Residential Address: Suburb Postcode

Church/s Attended: (Please circle)

Table with 5 columns: St Joseph's Forest Hill, St Mary's Gattton, St Therese's Glenore Grove, St Patrick's Laidley, Other Parish Please provide details

Sacraments:

Has your child already received any of these sacraments in a Catholic church? (Please circle)

Confirmation Yes/ No Eucharist Yes/ No Penance Yes/ No

If yes, please provide a copy



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CHILD'S NAME: (Please print)

PARENTAL CONSENT:

A copy of any Court Orders concerning residence arrangements for the candidate, time spent by the candidate with either parent, or parenting issues must be supplied with this enrolment form.

Are there any such Orders?

Yes / No
(Please circle)

Has a copy of every such Order been attached to this Enrolment Form?

Yes / No / Not applicable
(Please circle)

I hereby give my consent for the candidate whose name appears above, to be admitted to the Sacraments of the Catholic Church as indicated below: (Please tick)

- Baptism
- Confirmation
- Eucharist
- Penance

Father's Name: (Please print)

Father's Signature: Date://

Mother's Name: (Please print)

Mother's Signature: Date://

Note:

If this form is not able to be signed by the parents listed on the child's Birth Certificate, you will need to contact Father Noy

Photos:

Group and individual photos of the children will be taken during the Confirmation and Eucharist ceremonies.

Please indicate one option below:

- My child's photo may be taken during the sacramental ceremonies
- I do not wish my child's photo to be taken during the sacramental ceremonies

Contact:

If you have any queries or need to make an appointment, please email gatton@bne.catholic.net.au or phone the Parish Office on 5465 3131