

Sacramental Preparation Application and Fee

This form is applicable for the second year of Sacramental Preparation only

We request that our child, be admitted to the Faith Formation Sacramental Program.
Print their **FULL BAPTISMAL NAME** for the First Communion Certificate.

Age _____ Grade _____

For First Reconciliation & First Holy Communion, the following requirements must be submitted with this application:

- a copy of his or her **Baptismal Certificate**
- a 2" x 3" photo of your child for the **First Communion Banner**

Father/Guardian Signature _____ Date _____

Email: _____ Cellphone: _____

Mother/Guardian Signature _____ Date _____

Email: _____ Cellphone: _____

Residence: CITY: _____ STATE: _____

Sacramental Registration Fee - \$85.00 each child.
Payable to: St. Joseph Parish - Faith Formation

Sacramental Fee Ck. # _____ Cash _____ \$ _____ Date _____

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