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| Office Use Only       | Rec/FC | P |
| Last Name _____       |        |   |
| Date _____ Time _____ |        |   |

## Reconciliation & First Communion Registration Form

Please fill out the information below. To ensure proper recording of the sacrament a copy of the baptismal certificate must be included even if the child was baptized at St. Matthew.

### Child's Information

Please check the sacraments your child will be receiving \_\_\_\_\_ **Reconciliation** \_\_\_\_\_ **First Communion**

First & Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
*(Please write name as it should appear in permanent records)*

Date of Birth: \_\_\_\_\_ Age in May 2022: \_\_\_\_\_ School & Grade Level: \_\_\_\_\_

### Baptismal Information

Church of Baptism: \_\_\_\_\_ City/State: \_\_\_\_\_ Date: \_\_\_\_\_

### Family Information

Home Parish: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_  
*first last*

Mother's Name: \_\_\_\_\_ Religion: \_\_\_\_\_  
*first last*

Mother's Maiden Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

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

Special Needs or Family Arrangements that we should be aware of:

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### Sacrament Prep Fee

Cost includes classes and preparation materials. Make checks payable to St. Matthew Religious Education.

Reconciliation & First Communion: \$70

Reconciliation Only: \$30 First Communion Only: \$40

Please return this form, copy of baptismal certificate and payment to the parish office or mail to:

St. Matthew Parish  
Attn: Ann Dabeck  
130 St. Matthews Street  
Green Bay, WI 54301

Questions? Contact Ann Dabeck (anndabeck2232@gmail.com) or Mike Westenberg (mwestenberg@stmattsgb.org) at the St. Matthew parish office 435-6811.