

North County Outreach Initiative
Holy Family Catechesis Ministry of St. Francis of Assisi
2025-2026 (edited on 7.22.2025)

Today's Date: _____

Preferred days: M, Th, Sat, other _____

Family Registration # _____ (if you have one)

Sacramental Preparation for:

OCIA (3 Sacraments) ____ Baptism ____ 1st Communion ____ Confirmation ____

PERSON RECEIVING SACRAMENT

Name (First/Last): _____

Gender: M__F__ Age: _____ Date of Birth: (Month/Day/Year) ____/____/____

Grade in School: _____ School of Attendance: _____

PARENT INFORMATION

(Names as written on child's Birth Certificate)

Mother: Name (First/Last) _____

Received: Baptism: _____ 1st Communion: _____ Confirmation: _____

Father: Name (First/Last) _____

Received: Baptism: _____ 1st Communion: _____ Confirmation: _____

Married: Civil _____ Sacrament of Holy Matrimony _____

Address:

Cell

Mother: _____ Father: _____

E-mail

Mother: _____ Father: _____

Signature

Mother: _____ Father: _____

SPONSORS/GODPARENTS INFORMATION

(Needed for Baptism, Three Sacraments, Confirmation)

Full Name (First/Last): _____

Cell: _____ E-mail _____

Received: Baptism _____ 1st Communion _____ Confirmation _____

FLUENCY INFORMATION

Children: English _____ Spanish _____

Parents: English _____ Spanish _____

Sponsors: English _____ Spanish _____

FOR FIRST COMMUNION AND CONFIRMATION CANDIDATES

(From Child's Baptism Certificate)

Date of Baptism: (month/day/year) _____

Place of Baptism _____

Name of Church: _____

City: _____ State: _____

FOR CONFIRMATION CANDIDATES

(From First Communion Certificate)

Date of First Communion: (month/day/year) _____

FAMILIES:

Please share anything you want us to know about your children or family as we prayerfully prepare our family groups to help and support one another.
