



Sacred Hearts of Jesus and Mary Catholic Church
The Presbytery, Moorend Road, Charlton Kings, Cheltenham,
GL53 9AU

Telephone: 01242 524932

Email: cheltenham.sacredhearts@cliftondiocese.com

Parish Priest: Reverend Mark Moran

PREPARATION FOR FIRST CONFESSION AND
FIRST HOLY COMMUNION 2018-2019

Please complete the following details in block print, sign as indicated and return to the Presbytery, **before 13th October 2018**

Name of Child (as to appear on Certificate)

Known as

Date of Birth..... **Age**

Parent/Guardian

Address

..... **Postcode**

Contact numbers

Email address.....

School

Church of Baptism..... **Date**.....

Full Address.....

Please enclose a Baptismal Certificate if the child was not baptised at Sacred Hearts.

I/we would like my/our son/daughter to receive the Sacraments of Reconciliation and First Holy Communion.

I/we undertake to bring him/her to Mass regularly and will endeavour to attend all preparation sessions.

Signature of parent.....

General Data Protection Regulation

To comply with GDPR legislation we need your agreement:

- That the information provided on this form may be retained by the parish of Sacred Hearts and incorporated into an electronic file.
- That you give permission for the parish to contact you by email, to keep you up to date regarding the course and that these details may be made available by the parish, at its discretion, to any person or body assisting with the First Communion Programme.

I/we agree to this information being retained by the parish and give my/our permission to be contacted by email

Signature.....**Date**.....

Photographs

In accordance with our Child Protection Policy we will not permit photographs, video or other images of children and young people to be taken without the consent of the parents/carers and children.

The First Holy Communion Celebration will follow the guidance for the use of photographs and video recording, a copy of which is available from the Parish's Safeguarding Representative or the parish priest.

The Parish's Safeguarding Representative and the Parish Priest will take all steps to ensure these images are used solely for the purposes intended – **images must not be posted on social media or distributed without the consent of the parents/carers and children on the pictures.**

If you become aware that these images are being used inappropriately you should inform the parish priest immediately.

Medical Emergency

In the unlikely event of any accident, injury or illness, I/authorize an adult assistant to administer any first aid treatment, judged to be in my child's best interests, until I or another member of the family arrive to take charge of the situation. Medical information is entered below and I will inform you in writing if there are any changes which may affect my child's health.

My Son/Daughter suffers from the following condition and takes the following medication.
(E.g. Illnesses, Disabilities, Allergies or any other condition that we should be made aware of)

.....

Emergency Telephone Number (if different from over).....

Signed.....**Date**.....

Information provided on this form, together with all other personal data held about these individuals by the Parish and the Clifton Diocese, is processed in accordance with the Diocese's Privacy Notice; which is available at <https://cliftondiocese.com/privacy-notice> or from the Parish Office.



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