



NAZARETH PARISH

RICKETTS POINT

SACRAMENTAL PROGRAM

ENROLMENT REQUEST FORM

Please complete this form to register your child . I would like to request my child receive the Sacrament of : _____

Child's Name: _____

Age: _____ School _____ Grade/level _____

Parents/Carer Name: _____

Contact Number: _____

Email: _____

For more information please contact:

Lisa Brick - m:0402 480 224, email: lisabrick61@gmail.com or

Nazareth Parish office ph: 9589 2771 email: rickettspoint@cam.org.au

Visit our website at www.nazarethparish.com

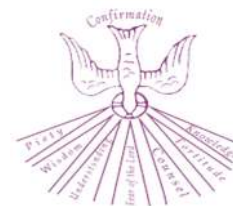
Reconciliation



First Communion



Confirmation



Stella Maris Church 2 Charlotte Rd, Beaumaris,
St Joseph's Church, 542 Balcombe Rd, Black Rock

Website: nazarethparish.com

Office: 9589 2271

Email: rickettspoint@cam.org.au