

Goulburn Mission



Office: Parish Centre
36 Verner St
Goulburn@cg.org.au
PO Box 11
Goulburn
NSW 2580
ph: 02 6299863

<http://cg.org.au/goulburn/Home.aspx>

Office Hours: Mon- Fri 8.30-12.30pm

GOULBURN, CROOKWELL, TARALGA- (please circle which parish)

SACRAMENTAL ENROLMENT FORM 2022 (please print clearly)

SURNAME: _____

CHRISTIAN NAMES: _____

HOME ADDRESS: _____

PHONE NO.: _____ Mobil: _____

EMAIL: * _____

SCHOOL: _____ CLASS: _____

DATE OF BIRTH: ____ / ____ / ____

*DATE OF BAPTISM: ____ / ____ / ____ Certificate Sighted Yes/No
(Office Use Only)

PARISH OF BAPTISM: _____

If you do not have a copy of the Baptism certificate, please contact the parish where Baptised and request one. Goulburn churches are on record here – please note which Church.

PARENT/GUARDIAN DETAILS

FATHER'S FULL NAME: _____ Religion _____

MOTHER'S FULL NAME: _____ Religion _____

MAIDEN NAME: _____

I WISH TO ENROL FOR THE SACRAMENT OF: (please circle sacrament)

Reconciliation Yr 3 \$50 Received p/m Y/N

First Holy Communion Yr 4 \$50 Received p/m Y/N

Confirmation Yr 7 + \$70 Received p/m Y/N

Signed.....Parent/Guardian

Questions you may have:

How does the preparation run?

Basically, it will only work with your support, in helping your child to complete the workbook at home and in bringing your child to take part in classes, and by attending our Sunday Masses.

How do I Register my child

Attend the enrolment night, either 9 March in Crookwell, or 16 March Goulburn.

Complete the Enrolment form - and return to the on the night or to Parish office

- Goulburn EFT BSB 062 786 ACC 000014927
Ref: surname/SAC

(please email receipt to goulburn@cg.org.au)

Crookwell EFT BSB 062 786 ACC 000014901
Ref: surname/SAC

IMPORTANT!

You will also need to provide a photocopy of your child's Baptism certificate with the enrolment form.

If your child was Baptised in this parish – we still require a copy of certificate with the date of Baptism and the Church they were Baptised in.

If you do not have a copy of the Baptism Certificate, please contact the Parish secretary of the relevant parish to arrange a copy.

To continue:

Please check the dates and the Sacrament preparation dates your child will need to attend before committing. Please see dates overleaf

If you are not available to commit to attending classes and Masses over the weeks for the preparation you are welcome to enrol next year (around the same time Feb.) and continue with your Sacramental preparation.

Please contact the Parish office for any questions

Regards

Sharon Cashman

Mission Secretary

02 62399863

MARY QUEEN OF APOSTLES PARISH
THE GOULBURN MISSION

36 VERNER ST (PO BOX 11)

Tel: 02 62399863

EMAIL: goulburn@cg.org.au

CREDIT CARD PAYMENT

Name: _____

I request and authorise Mary Queen of Apostles Parish to arrange funds to be debited from my nominated credit card as detailed below:

NAME ON CARD: _____

CREDIT CARD NUMBER: _____

EXPIRY DATE: _____

CV NUMBER: _____

AMOUNT: _____

PAYMENT FOR: _____

Please note that your details will be held in the strictest of confidence and will be destroyed once loaded on the Bpoint System which forms part of the Commonwealth Bank.

SIGNATURE ON CARD: _____

DATE: _____

EMAIL FOR RECEIPT PURPOSE: _____