## Sacramental Preparation Request Form – Year 2 RECONCILIATION – Grade 2 through 5

Oct. - Nov. 2025

By signing this form, I – the parent/guardian – am requesting that my child be brought into Full Communion with the Catholic Faith by making this first step in the Sacrament of Reconciliation – Year 2. I understand that this is the second year of a three-year preparation for Confirmation and Eucharist (3<sup>rd</sup> grade) and that my child will be not be fully initiated into the Catholic Faith until they have completed the three-year program.

My child, for whom I am requesting this Sacrament is:

1iddle Name	Last Name			
ce of birth	Current GradeSchool			
Catholic? Y N_	Another Christian faith? Which?			
	<del></del>			
	<del></del>			
<mark>te MUST accompany</mark> Iary Hannah, a copy i	with this form. s not required. Please provide approximat	•		
1iddle Name	Last Name			
e Cell Phone		Work Phone		
	ce of birth  Catholic? Y N_  te MUST accompany flary Hannah, a copy is tholic, a different pre	ce of birth Current GradeSchool  Catholic? Y N Another Christian faith? Which?  te MUST accompany with this form.  flary Hannah, a copy is not required. Please provide approximate tholic, a different preparation will be required. Contact Faith Form.  fliddle Name Last Name		

Relationship to child (if not	the Father)				
Mother/Guardian's Inf	ormation: You	may leave areas blar	nk that are the san	ne as above.	
First Name -	Middle Name		Last Name -		
Maiden Name					
Street Address					
City, State, Zip Code					
Home Phone	Cell Phone -		Work	Work Phone	
Email					
Relationship to child (if not	the Mother)			<u>.</u>	
Parish Membership:					
Our family is registered par	rishioners of				
If St. Mary Hannah,	Envelope Numbe	er?			
If not registered at own pastor IS requi	•	•	•	ament Preparation from your ation.	
Our family attends Mass	Regularly	Occasionally	Seldom	Never	
Signatures for Sacrame	ental Preparat	ion Request			
Child's Signature					
Parent/Guardian's Nan	ne – <i>printed</i>				
Parent/Guardian's Sign	ature				
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