

# Ss Austin & Gregory with St Anne, Margate

## FIRST HOLY COMMUNION AUTUMN 2021

*Please return this form to the Parish Office*

*38 Charlotte Place, Margate CT9 1LP*

Your Name: .....

Parent/Guardian of: .....

Date of Birth: .....

Address: .....

.....

Telephone Number: .....

Email address: .....

I would like my child to commence instruction  
in preparation for First Holy Communion (please tick)

**If the child has already started a First Holy Communion Course  
please tick this box and provide details to the office**

I would like my child to continue his/her instruction  
in preparing for First Holy Communion

Signed: .....

(Parent/Guardian)

Date: .....