



St. Ambrose R.C. Parish
210 South St. Cambridge ON

Sacraments of Reconciliation and Holy Communion 2021

Dear Parents/Guardians: The following information is required for our church records. Please complete the form and **return TO THE CHURCH OFFICE** at 210 South Street, Cambridge. **Return by February 15, 2021**

If you have any questions, please contact St. Ambrose Church office at **519-621-2013** during the day or email **stambrose@golden.net**

Only children baptized in the Roman Catholic faith can receive these Sacraments.

School attending: _____ Room # _____

Child's Full Name: _____

Date of Birth: *(month/day/year)* _____

Father's first and last name: _____

Mother's first and last name: _____

Marital Status of Parents: Married Common-law Single

If married, name of church _____

Home address: _____

Home or Cell Phone Number: _____

Email Address: _____

Please include a copy of your child's Baptism Certificate unless she/he was baptized at St. Ambrose Church.

Date of Baptism: *(month/day/year)* _____

Place of Baptism: *Name of Church* _____

City/Province/Country _____