



# St Joseph Pignatelli Catholic Church

Cnr Wichmann Rd and Galloway St, ATTADALE

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## SACRAMENT OF PENANCE ENROLMENT FORM 2023

Please use **BLOCK LETTERS** when completing this form

<b>LAST NAME:</b>	
<b>FIRST NAMES:</b>	
<b>DATE OF BIRTH:</b>	
<b>HOME ADDRESS:</b>	
<b>SUBURB &amp; POSTCODE:</b>	
<b>CONTACT NUMBER:</b>	
<b>EMAIL ADDRESS:</b>	
<b>DATE OF BAPTISM:</b>	
<b>PLACE OF BAPTISM:</b>	
<b>FULL NAME OF CHILD'S FATHER:</b>	
<b>FULL NAME OF CHILD'S MOTHER:</b>	
<b>SCHOOL NAME &amp; LEVEL:</b>	
<b>PARISH NAME:</b>	

### Important Information

Please note:

- **PARENT CHILD WORKSHOP: Wednesday**  
31<sup>st</sup> July at 3.30PM  or 5PM
- **RETREAT: Wednesday 30<sup>th</sup> August 2023** at Schoenstatt Shrine, Armadale
- **SACRAMENT OF PENANCE: Wednesday 20<sup>th</sup> September 2023** at 3.30pm

**Enrolment in Parish Religious Education Program Required (Required if not undertaking Catholic Schools Religious Program) Yes  No**

<b>Attached:</b>
1 <b>Copy of Baptism Certificate</b> <input type="checkbox"/>
2 <b>Enrolment Fee \$50</b> Cash <input type="checkbox"/> Cheque <input type="checkbox"/>
Direct deposit <input type="checkbox"/> <b>Lodged to:</b> St Joseph Pignatelli Parish Catechists Account <b>BSB: 086 - 006 &amp; Account No. 538147282</b>
3 <b>Completed Parish Membership and DDR if not already a Member</b> <input type="checkbox"/>

I certify that the above information that I have provided is true.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date