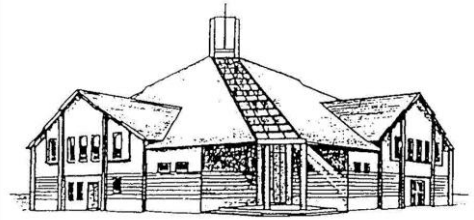


APPLICATION FOR SACRED HEART PARISH FIRST COMMUNION PROGRAMME



Name of Candidate _____

Address _____

Telephone _____

Date of Birth _____

Date of Baptism _____ Place of Baptism (Parish) _____

Address _____

School Attended (Now) _____

Signed _____

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