



The Parish of Saint Christopher

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Sacramental Preparation Parental Consent

Child's Full Name: _____

The following consent must be signed by ALL parents listed on the registration form.

Please fill out a separate form for each child.

1. **Permission to Attend Classes.** I, the undersigned, give permission for my child (named above) to attend faith formation classes and related functions of St. Christopher's Catholic Church.
2. **Permission to Receive Sacraments.** I give permission for my child (named above) to receive the sacraments (First Eucharist, Reconciliation, and/or Confirmation).

IMPORTANT: If only one signature is present, please attach supporting documentation either by way of a certified true copy of a separation agreement or court order which grants exclusive decision-making authority for the child to the signatory parent.

_____	_____	_____
Parent Signature	Full Name Printed	Date

_____	_____	_____
Parent Signature	Full Name Printed	Date

This form only needs to be filled out one time for each child unless there is a change in decision-making authority for the child. If there is such a change, the Faith Formation Office should be informed, copies of the appropriate court documents should be provided, and a new form must be filled out and signed by all appropriate persons.