

North Bedford Catholic Community of Holy Cross Church and Saints Philip & James Church

FIRST RECONCILIATION & FIRST HOLY COMMUNION 2025-2026 APPLICATION FORM

Please complete this form using **BLOCK CAPITALS** and return by **Sunday 07th September 2025** to the Parish Office, Holy Cross Church, 355 Goldington Road, Bedford MK41 0DP.

Full Name of Child: _____ Date of Birth: _____

School Attended: _____ Current Age: _____

Place of Baptism: _____ Date of Baptism: _____

Please enclose your child's original baptism certificate, if your child was not baptised at either Holy Cross Church or Saints Philip and James Church, Bedford.

Parents'/Guardians' Details:

First Name: _____ Surname: _____ Religion: _____

First Name: _____ Surname: _____ Religion: _____

Address: _____ Postcode: _____

E-mail Address: _____

Home/ Mobile Number: _____

Which Sunday Mass do you attend: _____ How Frequently? _____

Does your child have any learning, behavioural, medical or physical needs that we should be aware of? **Yes / No** If answering 'Yes', please give details in a separate letter.

PARENTAL DECLARATION AND COMMITMENT

At his/her Baptism I accepted the responsibility to become the first and best of teachers of the Catholic Faith for my child. I understand that for my child to be admitted to the Sacraments of First Reconciliation and First Holy Communion he/she is required to attend with a parent/guardian all of the Sacrament Preparation classes (Holy Cross Church Hall), Sunday Mass and other holydays of obligation.

Signatures of Parents/Guardians: _____ Date: _____

_____ Date: _____

Data Protection - Your personal details will be stored and used by the parishes for the purposes of conducting and administering the Sacramental Preparation course for First Reconciliation and First Holy Communion. By signing above, you acknowledge that Canon Law requires some of your personal data to be entered in Registers and stored permanently. Data may also be shared with the Diocese, e.g. in cases where certain permissions are needed. Your details will not otherwise be disclosed outside the parish. Details of how we process your data, and your rights, are on the full Privacy Notice which is on the Diocesan website at <https://northamptondiocese.org/privacy-and-cookies/>.

The Diocese of Northampton (the "Diocese") is a charity registered with the Charity Commission in England and Wales. Charity number 234091.

Consent for photography and filming

Photographs/films may be taken on behalf of the parish during the First Reconciliation and First Holy Communion programme as follows:

- of activities/meetings during the programme
- group photographs of participants at the Mass/ceremony at the conclusion of the programme.

Such photos/films may, at the discretion of the organiser/catechist/Parish Communications Team /Parish Priest, be used and published on the parish website and/or in printed publications (e.g. parish newsletter, parish circular).

Where a young person's image is published on a website, this means that it is potentially visible to anyone in the world, and we have no control over whether it is copied, edited or misused. We will do our best not to publish images which, in our judgement, the subjects might find embarrassing. We will be complying with the Diocese's Communications Technology, Photography and Filming Policy, and Privacy Policy, available at www.northamptondiocese.org/data.

Photos and films will be retained by the parish for no longer than 12 months and then permanently deleted.

If consent is given by signing below, it may be withdrawn at any time, and any images taken must then be deleted, or the subject's identifiability removed from them.

I consent to the taking and use of photos/films of my son/daughter as outlined above. ☐

I consent to the use of my/our child's photograph in the parish newsletter and in a display. ☐

I enclose a photo of my child (in casual clothing, not school uniform). ☐

Signature of Parent/Guardian: _____ Date: _____

Consent for future contact

We would like to keep in touch with you after the course and inform you of celebrations and events likely to be of interest. If you are willing to be contacted, please tick one or more of the method-of-contact boxes below, and sign your name.

E-mail ☐

Phone ☐

Post ☐

Signature of Parent/Guardian: _____ Date: _____