

ST CECILIA'S PARISH ENROLMENT FORM 2026 – SACRAMENT OF CONFIRMATION

Candidate's full name: _____

Address: _____

Date of Birth ____/____/____ School: _____ Year Level: _____

Parents' Names: _____

Phone: _____

Email: _____

Baptism Details: Is your child a baptised Catholic? Yes / No

Date of Baptism: ____/____/____

At Church: _____

(Please attach a copy of your child's Baptism Certificate)

Payment of 2026 Parish Contribution \$195 – Please tick one of the following options:

☐

I am in the Parish Thanksgiving Program – Payment not required.

☐

I am paying the Parish Contribution by direct deposit on: ____/____/____

Bank Details for Direct Deposit:

Name: St Cecilia's Catholic Church Camberwell South

BSB: 083-347 **Account Number:** 538952724

☐

I am paying by Credit Card on ____/____/____

Please scan QR Code for online payment:

Or click on the link to St Cecilia's Parish website for payment:

<https://www.melbcatholic.org/s/donate?id=0012w00000LOj4RAAT&parish=camberwellsouth>



Please attach details of any medical or other conditions or allergies relevant to your child and of any Family Law custodial orders we should be aware of while the child is under our supervision.

Sacramental Program Commitment by Candidate:

I am committed to preparing to receive the Sacraments of Confirmation and to attending all sessions as required.

Signed: _____ Date: ____/____/____

Sacramental Program Commitment by Parents:

We are committed to helping our child prepare to receive the Sacrament of Confirmation at St Cecilia's.

Signed: _____ Date: ____/____/____

Signed: _____ Date: ____/____/____