



ECCLESIA DOMESTICA

A Roman Catholic Homeschool Association in the Archdiocese of St. Louis



Sacrament Form

- First Communion** **First Communion w/First Reconciliation** **Confirmation**

(Include copy of Baptismal Certificate with completed form.)

Child's Full Name: _____ Date of Birth: ____/____/____

Parent's Full Names:

Father: _____ Mother: _____

Home Address: _____

Phone: (____) ____-____ Cell: (____) ____-____

E-mail: _____

Current Parish: _____ Parish Pastor: _____

Parish Address: _____ Parish Phone: (____) ____-____

Date of Baptism: ____/____/____

Parish of Baptism: _____ Parish Address: _____

Parish Phone: (____) ____-____

Confirmation Only:

Name of Sponsor: _____

Confirmation Name: _____

For Pastor To Complete:

The above named child and his/her parent(s) are registered members of the parish. I am acquainted with the child's proper formation, preparation and instruction required for receipt of the sacrament and know that this child has been homeschooled. I give my permission for him/her to receive the requested Sacrament in conjunction with Ecclesia Domestica.

Signature of Pastor or Parochial Administrator

Date: ____/____/____

Ecclesia Domestica Homeschool Association

c/o St. Clements of Rome

1510 Bopp Road, St. Louis, MO 63131

EcclesiaDomestica@att.net

"... believing families are of primary importance as centers of living, radiant faith. For this reason the Second Vatican Council, using an ancient expression, calls the family the *Ecclesia domestica*."

CCC 1656