



# St Martha's Catholic Church, Strathfield

70 Homebush Road, Strathfield NSW 2135  
Telephone: (02) 9746 6131 Fax: (02) 9764 3040  
Sacramental Parish Office Email: sc@stmarthas.org.au



## ***Our Sacramental program....***

*Assisting parents  
with their child's  
next steps in a  
lifelong  
adventure of  
faith.*

## ***First Reconciliation***

*"Bringing back  
together"*



Dear Parents, Caregivers and Candidates,

Attached is the application form for the First Reconciliation sacramental program to be completed and returned to the Parish office.

### **ELIGIBILITY TO RECEIVE THE SACRAMENTS OF:**

#### **First Reconciliation in Term 1.**

- Your child must be in Year 3 or above in 2021 to make Reconciliation.
- Have received the Sacrament of Baptism.

### **ENROLMENTS CONCLUDE MONDAY 15<sup>th</sup> FEBRUARY 2021.**

Your child's enrolment is guaranteed when the parish office has received your completed form, payment and copy of Baptism certificate.

### **Please observe the following important dates:**

<b>2021 Reconciliation Dates for Year 3 (IN FIRST TERM)</b>
Information Session <b>(Compulsory for one parent)</b>  Tuesday 16 <sup>th</sup> February 2021 6.30pm St Martha's Parish Hall
<b>Lesson 1 - 3:00pm</b> Saturday 20 <sup>th</sup> February  <b>Lesson 2 - 3.00pm</b> Saturday 27 <sup>th</sup> February  <b>Lesson 3 - 3.00pm</b> Saturday 6 <sup>th</sup> March  <b>Lesson 4 - 3.00pm</b> Saturday 13 <sup>th</sup> March  <i>All lessons will take place in the Parish Hall</i>
<b>Retreat &amp; Practice - 3.00pm</b> Saturday 20 <sup>th</sup> March
<b>First Reconciliation Liturgy</b> Tuesday 23 <sup>rd</sup> March at 6.30pm

**The Enrolment Fee for First Reconciliation 2021 (First term) is \$50. This Fee covers the cost of workbooks and associated printing of resources, pins, necklaces, certificates and photographer.**

**(Those who may have submitted an early payment last year will receive credit for the future Sacraments of First Holy Communion and Confirmation).**

NB: No child will be excluded from participating in our Sacramental Program due to any financial concerns. Should you wish to discuss this matter further, please feel Free to contact Father John Hayes who is very open to your situation.

For further information please contact the Sacramental Co-ordinator via email [sc@stmarthas.org.au](mailto:sc@stmarthas.org.au)

Yours Sincerely,

Father John Hayes  
Parish Priest

# St Martha's Catholic Church 2021 First Reconciliation (First term)

(Please print or write legibly.)

**PLEASE COMPLETE ALL DETAILS AND RETURN TO THE PARISH OFFICE**

**by Monday 15<sup>th</sup> February 2021. Parish Address: 70 Homebush Rd, Strathfield NSW**

## Candidate's Details

Child's Full Name			
Date of Birth		Child's Gender	Male/Female
School Attends			Grade

## Family Details

Father's Full Name			
Father's Religion		Mobile	
Mother's First & Maiden Name			
Mother's Religion		Mobile	

## Contact Details

Home Address		Ph:	
Email Address			

## Parish

Do you attend Mass weekly at St Martha's? If no,  Yes  No \_\_\_\_\_  
please state which Parish do you worship regularly at?

If Yes, which Mass(es)?  Sat 5:00pm  Sun 8am  Sun 10am  Sun 6pm

Are you registered and contribute via our weekly planned giving envelopes?  Yes  No

Would you like to contribute to our weekly planned giving?  Yes  No

## Details of Candidate's Sacraments

Parish where Baptised		Date	
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# COMMITMENT TO THE SACRAMENT OF RECONCILIATION:

(To be read, discussed and signed by the candidate and parents/caregivers)

- I will willingly participate in preparation for the Sacrament of Reconciliation.
- I will attend all preparation sessions and participate in the activities and discussions throughout the program.
- I will complete all homework.
- I will attend the Information Session and Commitment Mass for the Reconciliation program.
- I will attend Mass at St Martha's Strathfield on a weekly basis especially throughout the period of the Sacramental program.
- I will accept more responsibility in my family, parish and community, now and in the future.

If there are any issues/difficulties with meeting the above requirements, please make an appointment to see Father John.

**Father John** in consultation with the Sacramental team reserves the right to defer any candidate if the requirements stated above are not fulfilled by the candidate and family. *Father John's* decision will be final.

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Candidate's Signature

Mother's Signature

Father's Signature

Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_

Cash/chq encl.     I'm paying by credit card:     MasterCard     VISA    EXP:

Name on Card

Amt

**\$50.00**

Credit Card No

              

Signature on Card

Date

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## Office Use Only

- Registration Form and payment received
- Baptismal Certificate attached

Date:	Amt: <b>\$50.00</b>
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Parish:
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**CONSENT TO FILM OR PHOTOGRAPH A CHILD**

Name of individual child/children:

\_\_\_\_\_ (Child/children)

Address: \_\_\_\_\_

State: \_\_\_\_\_ NSW Age/s: \_\_\_\_\_

Parish: \_\_\_\_\_ St Martha’s Parish Strathfield

Parish Priest: \_\_\_\_\_ Father John Hayes

**1. PHOTOGRAPHIC/VIDEO/AUDIO/COMMUNICATION RELEASE**

I, \_\_\_\_\_ [name of parent/caregiver], of the abovementioned child/children, authorise St Martha’s Parish, Strathfield and/or its approved nominees, to take and use photographs, video or sound recording and any reproductions or adaptations of the student’s likeness (‘the material’), either in full or part, in conjunction with any wording or drawings, in any St Martha’s Parish publication, production and presentation. This includes electronic publications on the St Martha’s Parish website.

*Note: children will not be identified by name (without additional consent).*  Yes  No

I also consent to the above material being used for promotional purposes in the media.

*Note: children will not be identified by name (without additional consent).*  Yes  No

I acknowledge that neither I/we nor the abovementioned child/children have any commercial rights in any St Martha’s Parish publication, production or presentation which includes the material.

I/we understand that this material will not be provided to any third party, other than as set out in this document without our/my express consent.

**2. WHAT HAPPENS TO THE CONSENT FORM ONCE IT IS FILLED OUT AND SIGNED?**

The consent form will be placed in the sacramental file at St Martha’s Parish.

\_\_\_\_\_  
[Signature of Parent / Guardian]

\_\_\_\_\_  
[Date]

\_\_\_\_\_  
[Signature of Parish Priest]

\_\_\_\_\_  
[Date]