

*First Reconciliation 2019-2020*  
*Holy Family Parish*

Child's Name: \_\_\_\_\_

The child named above participated in the sacrament of Reconciliation at

(Name of Church) \_\_\_\_\_

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



Name of Parent(print): \_\_\_\_\_

Name of Priest (print): \_\_\_\_\_

Signature of Priest: \_\_\_\_\_