

## CONFIRMATION INFORMATION FORM

In order to be enrolled for Confirmation, the following information is required. Turn in a **COPY** (not the original) of the Baptismal Certificate with this form, if one is not already on file.

**\*Due by February 26, 2015\***

*Please type or print clearly the information requested below.*

FULL NAME OF CANDIDATE: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_ MAIDEN NAME: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

ALTERNATE PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

STUDENT'S DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

CONFIRMATION SAINT NAME: \_\_\_\_\_

SPONSOR'S NAME: \_\_\_\_\_

SPONSOR'S HOME PARISH, CITY/STATE: \_\_\_\_\_

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### RECORD OF BAPTISM

CHURCH OF BAPTISM: \_\_\_\_\_

If military baptism, please provide, MILITARY RECORD NUMBER: \_\_\_\_\_

ADDRESS OF CHURCH: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DATE OF BAPTISM: \_\_\_\_\_

TO BE COMPLETED BY THE OFFICE OF RELIGIOUS EDUCATION

CONFIRMATION FEE PAID: \_\_\_\_\_ ON \_\_\_\_\_

RETURN TO HOLY SPIRIT'S OFFICE OF RELIGIOUS EDUCATION