

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

Due by February 20, 2016

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: _____

CANDIDATE'S HEIGHT (FOR CONFIRMATION ROBE): _____

SPONSOR'S NAME: _____

SPONSOR'S HOME PARISH, CITY/STATE: _____

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 _____