

CONFIRMATION CANDIDATE
Registration form

Name: _____

Address: _____

Home Phone Number: _____

Cell Phone Number: _____

E-mail Address: _____

(will be used to help keep you informed of events or any changes)

Date of Birth: _____ Age: _____

Birth City: _____

Date of Baptism: _____ (Please bring in a copy of Certificate)

Place of Baptism: _____

Address of Church: _____

Date of First Communion: _____

Place of First Communion: _____

Parents Names: Father _____

Mother _____

(please include maiden name)

Parish in which you are registered: _____

Sponsor's Name: _____

Sponsor's Address: _____

Sponsor's Phone Number: _____