

APPLICATION FOR THE RECEPTION OF THE SACRAMENT OF CONFIRMATION

Please print clearly the information requested below and return the completed form together with all required documents as soon as possible to Parish Office. No one may be confirmed unless they have received sufficient instruction in Catholic teaching, especially with regard to the Sacrament of Confirmation. For this reason, all candidates for Confirmation must attend all Confirmation PREP classes and retreats faithfully.

NAME OF PERSON TO BE CONFIRMED			
FULL ADDRESS			
PARENT/GUARDIAN EMAIL		PHONE NUMBER	
PARENT/GUARDIAN STATUS (Circle)	Married/Separated/Divorced	ADULT T-SHIRT SIZE (Circle) S M LG XL XXL	
DATE OF BIRTH	P	LACE OF BIRTH	
SCHOOL	HOME PARISH		
(Notice: If not registered, you may NO	OT BE CONFIRMED without wr	itten acknowledgement from Pastor of home parish.)	
FATHER'S NAME			
SAINT'S NAME TO BE TAKEN AT CONF	IRMATION		
SPONSOR NAME	NSOR NAME SPONSOR HOME PARISH		
•		who has been confirmed and free from canonical rent Eligibility Form signed by his/her home parish.	
R	ECORD OF BAPTISM AND FIRS	ST COMMUNION	
DATE OF BAPTISM	CHURCH OF BAPTISM		
CITY	STATE	ZIP CODE	
DATE OF FIRST COMMUNION	CHURCH OF FIRST	COMMUNION	
CITY	STATE	ZIP CODE	
In that case, provide date of Baptism a	as closely as you can as we wil	o certificate need be submitted with this application. I consult our Parish records for the required s Parish, a copy of the certificate of Baptism must be	
		the costs for the Confirmation Retreat. ice directly on or before the retreat.	
Parent/Guardian Signatu	ure	Holy Spirit Pastor or Designee	