

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.

NAME OF PERSON TO BE CONFI	RMED	
ADDRESS	DA	TE OF BIRTH
SCHOOL	HOME PARISH	
(Notice: If you are not from this Pastor of your home Parish.)	s Parish, you may NOT BE CONFIRMED he	ere without permission in writing from the
FATHER'S NAME		
MOTHER'S MAIDEN NAME		
NAME OF YOUR SPONSOR		
		·
penalty. If sponsor is from this	Parish, no testimonial letter in necessary.	has been confirmed and free from canonical We will consult our records for the necessary from the sponsor's Parish must be submitted.)
	RECORD OF BAPTISM	
DATE OF BAPTISM	CHURCH OF BAPTISM	
CITY	STATE	ZIP CODE
DATE OF FIRST COMMUNION_	CHURCH OF FIRST CC	MMUNION
CITY	STATE	ZIP CODE
application. In that case, provide	rson to be Confirmed was NOT Baptized a	rtificate need be submitted with this s we will consult our Parish records for the at this Parish, a copy of the certificate of Baptism
-	s they have received sufficient instruction For this reason, all candidates for Confir	n in Catholic teaching, especially with regard to mation must attend all PREP classes and
Special robes appropriate for th purchasing new suits or dresses	·	d girls alike. This will eliminate the expense of
Signature of Parer	nt/Guardian	Signature of Holy Spirit Pastor