

**INFORMATION FORM  
SACRAMENT OF CONFIRMATION**

Please print clearly the information requested below and return the completed form together with all required documents as soon as possible. This information must be completed before your child may receive the Sacrament of Confirmation.

**PLEASE PRINT**

Name \_\_\_\_\_

Last

First

Middle

Confirmation Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Age (at time of Confirmation) Years \_\_\_\_\_

**Place and Date of Baptism**

Church \_\_\_\_\_ City & State \_\_\_\_\_

When \_\_\_\_\_

*Month*

*Day*

*Year*

**NOTICE:** If the person to be Confirmed was baptized in our Parish, we will consult our Parish records for the required information.

**Present Residence**

\_\_\_\_\_

Street

Town

Zip

Phone

Father's Full Name \_\_\_\_\_

Mother's Full Maiden Name \_\_\_\_\_

Sponsor's Name \_\_\_\_\_ Relationship \_\_\_\_\_

Sponsor's Age \_\_\_\_\_

Sponsor's Parish \_\_\_\_\_

Name of Parish

City, State

Zip

**Please return form and sponsor's letter of eligibility**

**NO LATER THAN TUESDAY, OCTOBER 4TH**

**Thank you!**