

**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 at the 8<sup>th</sup> Grade parent meeting .

NAME OF PERSON TO BE CONFIRMED \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

SCHOOL \_\_\_\_\_ HOME PHONE \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

MOTHER'S MAIDEN NAME \_\_\_\_\_ MOTHER'S FIRST NAME \_\_\_\_\_

SAINT'S NAME TO BE TAKEN IN CONFIRMATION \_\_\_\_\_

NAME OF YOUR SPONSOR \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME PARISH OF YOUR SPONSOR \_\_\_\_\_

(Notice: The sponsor must be a practicing Catholic. If your sponsor is from this Parish, **no Sponsor Form** is necessary. We will consult our records for the necessary information. If your sponsor is NOT from this Parish a **Sponsor Form** from your sponsor's own Parish must be submitted with this application.

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**RECORD OF BAPTISM**

DATE OF BAPTISM \_\_\_\_\_ CHURCH OF BAPTISM \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

(Notice: If the person to be confirmed was baptized in this church, no certificate need be submitted with this application. In that case merely indicate the date of Baptism as closely as you can and we will consult our Parish records for the required information. If the person to be confirmed was NOT baptized in this church, a certificate of Baptism must be submitted herewith.