

**SACRAMENT OF CONFIRMATION 2018 REGISTRATION FORM**

To be completed and returned to your child's teacher or the parish office by November 30<sup>th</sup>, 2017.

**\*\*PLEASE PRINT CLEARLY IN CAPITAL LETTERS\*\***

**CHILD'S INFORMATION:**

Last name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**PARENTS' INFORMATION with contact numbers:**

Father: Last name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Mother: **Maiden** name: \_\_\_\_\_ First name: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_

**CHILD'S BAPTISMAL INFORMATION: IMPORTANT – Please complete and print clearly.**

**Please provide all of this information as a 'Notice of Confirmation' must be mailed to your child's Parish of Baptism.**

Date of Baptism: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

Name of church where child was baptised: \_\_\_\_\_

Address of church: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

**A photocopy of the child's BAPTISMAL CERTIFICATE must be attached to this form and the form must be returned to his/her teacher or the parish office by November 30<sup>th</sup>, 2017.**

**SPONSOR'S INFORMATION: Sponsor must be a practicing Catholic, at least 16 years old.**

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Name of church where sponsor was confirmed: \_\_\_\_\_

Date of sponsor's Confirmation: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

**PROOF (email or letter from appropriate parish or copy of Confirmation certificate) of the SPONSOR'S CONFIRMATION must be attached to this form and the form must be returned to your child's teacher or parish office by November 30<sup>th</sup>, 2017.**