



ST. MARY PARISH



Confirmation Registration Form

Candidate's Information

First: _____ Middle: _____ Last: _____

Date of Birth: ____/____/____ Age: _____ Place of Birth: _____

Parent Information

Name of Father: _____

Name of Mother: _____

Teen lives with: _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Candidate's Religious History

Place of Baptism (parish and diocese): _____

Date of Baptism: _____

***Please provide a copy of Baptismal Certificate**

Has candidate received First Holy Communion? _____

Date of last Reconciliation (month and year): _____

Saint Name: _____

Sponsor Name: _____

I understand that by registering for St. Mary Parish's Confirmation Program that I am requesting the permission of Fr. Vrazel and Archbishop Rodi to receive the Sacrament of Confirmation. I understand that I am responsible for attending all retreats and classes, and that if I am unable to attend any activity, I must speak with my youth minister to make other arrangements. I understand that the Sacrament of Confirmation is a gift, and that it is my choice to accept this gift.

Candidate's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____