

**Sacrament of Confirmation
Registration Form for Adults**

Name _____

Street Address _____

City/State/Zip _____

Cell _____ Work _____

Email address _____

Date of Birth _____

As an adult,

I am currently a registered parishioner at _____

I am currently not registered in a parish _____

How often do you attend Mass? _____

Sacramental Record

Baptism:

Church and date _____ Church mailing address

**We must verify your Baptism prior to registration; please locate your original Baptismal certificate (with seal), or contact the Church of Baptism and ask for a new certificate. We will make a copy for our files, and return the original to you.*

Holy Communion: Yes No

First Reconciliation: Yes No

Matrimony: **Marital status:** Single Married Divorced Widowed

If married, was it in the Catholic Church? Yes No

Maiden Name _____

