

CONFIRMATION REGISTRATION FORM

St. Patrick's Church 519-451-4600
377 Oakland Ave London, ON stpatrick@dol.ca

CANDIDATE'S NAME _____
 First Last

FULL ADDRESS _____

PHONE # _____ E-MAIL _____

FATHER'S FULL NAME _____
 First Last

MOTHER'S FULL NAME _____
 First Maiden Last (Name before marriage)

CANDIDATE'S DATE OF BIRTH: _____
 month day year

PLACE OF BIRTH (city): _____ COUNTRY _____

CANDIDATE'S DATE OF BAPTISM: _____
 month day year

NAME OF THE CHURCH OF BAPTISM: _____

PLACE OF BAPTISM (city) _____

SCHOOL ATTENDING _____ GRADE _____

CHURCH YOU ATTEND ON SUNDAYS _____

CONFIRMATION NAME (Christian name) _____

SPONSOR'S FULL NAME & RELATIONSHIP _____
(Sponsor must be baptized & confirmed Catholic)

Signature of Candidate _____ Signature of Parent _____

Date of Confirmation: Sunday, December 1, 2019 at St. Patrick's Church.

Please attach a copy of the Baptismal Certificate.