# CONFIRMATION PROGRAM REGISTRATION FORM

**Complete all lines--Please print.** Information is sent to your church of baptism after confirmation.

**Full Name**: _____
First Middle Last

Current **Age**:_____ **Grade**: _____

**Confirmation Name**:_____

Father's full name: _____

Mother's full name: _____ Maiden name: _____

Home address:_____

Phone number(s):_____

Date of Birth:_____ Town/State of birth: _____

Date of Baptism:_____

Church of Baptism (if not SS Peter and Paul or St. Joseph/Fayette, we need a copy of your Baptism Certificate):

_____

Church Mailing Address:_____
PO Box/Street City, State, Zip

First Eucharist:_____
Church Date

## Sponsor Information:

**Name of Sponsor for Confirmation**:_____
First Last

**Sponsor's Parish**:_____

***If sponsor is not a member of SS Peter & Paul or St. Joseph/Fayette, we need a parish referral/confirmation form from his/her home parish. Please see a Team Member for a form for this requirement**.*

***Sponsor must be at least 16 years of age, may not be a parent, and must be regularly attending Mass and active in his/her parish.***