Confimation Registration Form

2026-2027

Date _____

Student Information

Students Name: _____
First *Middle* *Last*

Date of Birth:_____

Address: _____

Grade:_____

☐ 1st Year

☐ 2nd Year

_____
City *State* *Zip*

Phone #: _____ Email: _____

Baptism Date:_____ Baptism Location: _____

Sponsor/Godparent Name:_____

1st Communion Date:_____

Confirmation Mentor Name:_____ Phone #:_____

Address: _____ Email: _____

Parent Information

Father's Name: _____ Phone#_____
First *Last*

☐ Member

Address: _____

Email:_____

_____
City *State* *Zip*

Mother's Name: _____ Phone #_____
First *Last*

☐ Member

Address: _____

Email:_____

_____
City *State* *Zip*

best way to communicate: ☐ Email _____

☐ Text _____