

Registration for

Please Check One: **First Reconciliation/First Communion** **Confirmation**

CANDIDATE INFORMATION

Name of Candidate			
Date of Birth		Place of Birth	
School		Grade	
Date of Baptism			
Church of Baptism			
Address Church of Baptism			
Copy of Baptism Certificate Submitted	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required (If Baptized at St. Mary's)		
Agreement of parents	Mother <input type="checkbox"/> Yes <input type="checkbox"/> No Father <input type="checkbox"/> Yes <input type="checkbox"/> No		

CONFIRMATION CANDIDATES - *The following information is required only by Confirmation Candidates.*

Has Candidate received the Sacrament of First Reconciliation	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required		
Date of First Communion			
Church of First Communion			
Address Church of First Communion			
Name of Confirmation Sponsor			
Email of Sponsor		Phone of Sponsor	

FAMILY INFORMATION

Name of Father / Guardian			
Name of Mother/ Guardian		Maiden Name	
Mailing Address (Street, Unit#, City, Postal Code)			
Email		Phone	
Do you intend that the Sacrament be received at St. Mary's?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

ACTION - *Office Use Only*

<input type="checkbox"/> Entered in Parish Records	<input type="checkbox"/> Entered in OPF	<input type="checkbox"/> Entered Diocesan Form
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