Confirmation Candidate Registration Form 2018/19

Candidates: Please complete and return this form to the Religious Education Office.

1. Please provide the following general information: Please print your name as you would like it to appear on the Confirmation certificate.

| Candidate Name: First Middle Last | | - | 16.17 | | |
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| Name of Father: First Middle Maiden Name Last Name | Birthdate: | First | Middle | | SI |
| Name of Father: First Middle Last Name | Name of Mother: | _ | | | |
| Candidate Address: | | | | Maiden Name | Last Name |
| Candidate Address: | Name of Father: | First | Middle | Last Name | |
| Email | | | | City: | Zip: |
| Email | Phone: | | 0.6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | T. I. (| 17. 10 |
| Has the youth been baptized Catholic or received into the Catholic Church? Yes / No Was the youth baptized: 1) through RCIA? Yes / No; 2) through the Eastern Rite? Yes / No Was the youth baptized into a non-Catholic church? Yes / No Church of First Eucharist (Communion): Name of Church City/State | | | | | k/cell) |
| Was the youth baptized: 1) through RCIA? Yes / No; 2) through the Eastern Rite? Yes / No Was the youth baptized into a non-Catholic church? Yes / No Church of First Eucharist (Communion): Name of Church Please provide the following baptismal information: Month and Year of Baptism: Church: Name of Church Name of Church Address City/State Your child was not baptized nor made their First Eucharist at St. Francis, please include a copy of the baptismal rificate. Certificates may also be faxed to us at 734-821-2102. Please mark ATTN: Religious Education—infirmation. Please provide the following Sponsor information. Your sponsor must be a confirmed Catholic who actively practices their faith and is sufficiently mature. Parents cannot be Confirmation sponsors for their own children. It is greatly encouraged that the baptismal sponsor also the confirmation sponsor. Mr./Mrs./Ms. First Name Last Name WORLS. INTROSE DAIS. PLOSE DAIS. STATES DAIS. | EmaiiCandidate | | Mother | Fa | ther |
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