

Confirmation Registration 2018-2019

Holy Cross~St. Mary's~Holy Rosary

PO Box 70, Timber Lake, SD 57656

www.HolyCrossTimberLake.com

holycrosschurch57656@gmail.com

605-865-3653

1. Complete *this* Registration Form.
2. Attach a recent copy of the candidate's Baptismal Certificate
(If child was *not* baptized at Holy Cross, St Mary's, or Queen of the Holy Rosary)

CANDIDATE INFORMATION

DATE OF BIRTH: _____ HOME PHONE: _____

NAME: _____
FIRST MIDDLE LAST

ADDRESS: _____
PO BOX/STREET CITY STATE ZIP

CANDIDATE CELL PHONE: _____ CANDIDATE EMAIL: _____

GRADE IN FALL 2018: _____

CANDIDATE'S SACRAMENTAL INFORMATION

PARISH OF BAPTISM: _____
NAME OF PARISH CITY STATE ZIP

DATE OF BAPTISM: _____ CITY OF BIRTH: _____

I HAVE MADE MY FIRST RECONCILIATION: YES NO I HAVE RECEIVED MY FIRST HOLY COMMUNION: YES NO

DATE: _____ PARISH: _____ DATE: _____ PARISH: _____

PARENT INFORMATION

FATHER'S NAME: _____
FIRST MIDDLE LAST CATHOLIC Y/N

MOTHER'S MAIDEN NAME: _____
FIRST MIDDLE LAST (MAIDEN) CATHOLIC Y/N

EMAIL ADDRESS: _____ WORK PHONE: _____

FATHER'S CELL PHONE: _____ MOTHER'S CELL PHONE: _____

SPONSOR INFORMATION

SPONSOR'S NAME: (MR., MRS., MISS, MS.) _____
FIRST MIDDLE LAST

SPONSOR'S ADDRESS: _____

I HAVE READ THE CONFIRMATION CANDIDATE REQUIREMENTS, THE SPONSOR/MENTOR REQUIREMENTS, AND THE CONFIRMATION SCHEDULE WHICH INCLUDES SUNDAY PREPARATION SESSIONS AND AN OVERNIGHT RETREAT. I UNDERSTAND AND ACCEPT THESE REQUIREMENTS AND I AM READY TO BEGIN MY PREPARATION FOR THE SACRAMENT OF CONFIRMATION.

CONFIRMATION CANDIDATE SIGNATURE

PARENT/GUARDIAN SIGNATURE