

SAINT THOMAS THE APOSTLE
Confirmation Program

Registration for Confirmation

Please return this completed form as soon as possible to the Patti in the Faith Formation Office.

Note: *If the candidate was baptized anywhere other than here at Saint Thomas the Apostle Church, a copy of his/her Baptismal Certificate with Notations must be attached.*

Candidate's full name _____

Age _____ Date of Birth _____

Candidate's date of Baptism _____

Name of parish of Baptism _____

Address of parish of Baptism _____

City _____ State _____ Zip _____

Names of candidate's parents

Mother _____
(maiden name) *(first)*

Father _____
(last name) *(first)*

Date of First Eucharist _____

Church of First Eucharist _____

Candidate's Address _____

Candidate's family's preferred Phone _____

Email _____

SPONSOR'S NAME _____

FOR OFFICE USE ONLY:	Confirmation Patron Saint Name _____		
Baptism BK _____	Census _____	Confirmation _____	Notification _____