

# CONFIRMATION REGISTRATION FORM

Student's Name \_\_\_\_\_  
**First** **Last**

Home Street Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Given and Maiden Name \_\_\_\_\_

School \_\_\_\_\_ Teacher \_\_\_\_\_

Baptism \_\_\_\_\_ Roman Catholic or Other \_\_\_\_\_  
**Date** **Religion/Rite**

Church

Full Address

**If your child's baptism was in a Church other than St. Mary's Church, Brantford a copy of the baptism certificate must accompany this application.**

Confirmation Name Chosen \_\_\_\_\_

Sponsor's Full Name \_\_\_\_\_  
(Sponsor **MUST** be a fully initiated Catholic 16 or older and not the candidate's parent)

Sponsor's Current Parish \_\_\_\_\_

I wish my son/daughter to be admitted to the program of preparation for the Sacrament of Confirmation.

\_\_\_\_\_  
Signature of Parent/Guardian

**\*PLEASE BRING THIS FORM WITH YOU TO THE PARENT/GUARDIAN MEETING\***