

ST. PETER THE APOSTLE
CONFIRMATION REGISTRATION FORM



Please Complete and Return to St. Peter's Parish Office

FULL Christian Name (Last, First & Middle Names)			
FULL Mailing Address			Phone Number
Gender	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	Confirmation Name (Optional)
Date of Birth: Month	Day	Year	Place of Birth
Church of Baptism			Date of Baptism
Complete Church of Baptism Address <i>(Information required to send notification of Confirmation to Church of Baptism)</i>			
IF YOU WERE NOT BAPTIZED AT ST. PETER THE APOSTLE CHURCH, YOU MUST INCLUDE A PHOTOCOPY OF YOUR BAPTISMAL CERTIFICATE WITH THIS APPLICATION. (THE ADDRESS OF THE CHURCH OF BAPTISM MUST BE INCLUDED.)			
School Attending		Current Grade Level	
Confirmation Sponsor's Name		<i>Sponsor must be at least 16 years of age, and a baptized and confirmed member of the Roman Catholic Church.</i>	

Parent/Guardian (s) Name	
Parent/Guardian (s) Name	
Parent/Guardian (s) Telephone	E-MAIL _____ (PLEASE NOTE THAT CONTACT INFORMATION IS IMPORTANT)

Allergies:
Special Needs:

PLEASE DOUBLE-CHECK THAT YOU HAVE PROVIDED ALL INFORMATION

Full Addresses & Email Addresses are important for Correspondence

Remember to please attach your baptismal certificate!

