



CONFIRMATION REGISTRATION FORM

Please **COMPLETE** this form and **BRING** it on registration day.

PLEASE PRINT \rightarrow 2 PAGES - PRINT ON BOTH SIDES (Using 1 sheet of Paper Only)

Parish Information

Name of Parish:	City:			
 I currently live within the territorial boundaries of the parish. I currently do not live within the territorial boundaries of the parish, but I am formally registered at the parish. 				
Child's Information				
Full legal name of child:				

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First Name	Middle Name(s)	Last Name	
Male Female Date of Birth:	City of Birth:		
Church of Baptism:		Date of Baptism:	
Address of Baptismal Church:			
Name of School:		Grade:	

Parent's Information

Mother (Full legal name & Maiden Name):						
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First Name	Middle Name(s)	Last Name	(Maiden Name)			
Religion: 🔲 Roman Catholic 🛛 Other:			None			
Present Address:						
Stre	et	City	Postal Code			
Phone:		Email:				
Father (Full legal name): First Name	Middle Name(s)	Last Name				
Religion: 🔲 Roman Catholic 🛛 Other:			None			
Present Address: Same as mother's						
Stre	at	City	Postal Code			
Phone:	сı	Email:	Puskal Cude			
■ I am a parent of, or have legal custody of the child. ← PLEASE MARK THE BOX						

Eligibility of Godparent

Canon 892 Insofar as possible, there is to be a godparent for the person to be confirmed; the godparent is to take care that the confirmed person behaves as a true witness of Christ and faithfully fulfills the obligations inherent in this sacrament.

Canon 893 §1. To perform the function of godparent, a person must fulfill the conditions mentioned in canon 874 §1 (see below).

The following are the requirements in order for a Catholic to be a godparent (canon 874 §1):

- at least 16 years of age
- he/she has been fully initiated in the Catholic Church (received Baptism, Holy Communion, and Confirmation)
- in good standing with the Catholic Church: live a life of faith which befits the role to be undertaken; not under canonical penalty
- not the father or mother of the one to be confirmed

Godparent's Information

Godparent (Full legal name):						
	First Name	Middle Name(s)		Last Name		
Current Parish:						
Present Address:						
	Street	City			Postal Code	
Phone:		Email:				
■ Fulfills the requirements of canon 874. ← PLEASE MARK THE BOX						

Declaration

I, the undersigned, declare that the information on this form (Pages 1 & 2) is true and accurate.				
Name (please print):				
Signature: PLEASE SIGN →	Date:			

CONFIRMATION GOWN SIZING... PLEASE CIRCLE BELOW THE HEIGHT OF YOUR CHILD

XXS	XS	S	Μ	L	XL	XXL
4'3"	4'5"	4'9"	5'2"	5'5"	5'8"	6'
х	х	х	х	х	х	and
4'5"	4'8"	5'1"	5'4"	5'7"	5'11"	UP
129 to 134 cm	137 to 142 cm	145 to 158 cm	158 to 163 cm	166 to 170 cm	173 to 180 cm	180 cm and UP