

# PURPOSE

## Confirmation Registration

Parents Contact Email \_\_\_\_\_

### Confirmation Candidates

#### CANDIDATE 1

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Candidate's Email: \_\_\_\_\_

#### Place of Baptism:

St. Catherine of Siena Parish

St. Maria Goretti

St. Vincent de Paul

Other: \_\_\_\_\_

(You must provide a certified copy of the Baptismal Certificate)

### Parent/Guardian Information

Are you a current member of St. Catherine of Siena Parish?  Yes  No

#### Mother's Information

First: \_\_\_\_\_ Last: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Father's Information

First: \_\_\_\_\_ Last: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Address Candidate Resides at

Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**Enter additional Candidates on back side**