

**PLEASE COMPLETE AS MUCH AS POSSIBLE TODAY RETURN TO:
Elizabeth Auffrey, Dir of Children's Faith Formation**

Saint Bernadette Catholic Church
Sacramental Registration Form

Sacrament(s) Requested: **Confirmation**

Last Name _____ First Name _____ Middle Name _____

(no initials)

Date of Birth _____ (month/day/year) City/State of Birth _____

Father's Last Name _____ First Name _____ Middle Name _____

(no i

Mother's Last Name _____ First Name _____ Middle Name _____

Mother's Maiden _____

Email Address _____

Home phone # _____ Day time phone # _____

Candidates Religious History

Baptism Name of Catholic Church: _____

Name of Protestant Church: _____

Date of Baptism _____ (month/day/year) City/State of Church _____

First Communion Name of Catholic Church: _____

Date _____ (month/day/year) City/State of Church _____

Priest celebrating Confirmation **Archbishop Joseph Kurtz**

Date **February 19, 2020**

Sponsor's Full Name **TBD**

Saint Name **TBD**