



St. Patrick Catholic Church

Confirmation Registration Form

(This form must be filled out and returned by September 19 with a \$75.00 Administrative fee.
Please make checks payable to St. Patrick Catholic Church.)

Please print name as it will appear in the Church register:

Name _____
First Middle Last

Address _____
Street City State Zip code

Date of Birth _____ Age _____

Home Phone # _____ Cell # _____

E-mail Address: _____

Family Information

Fathers Name _____ Religion _____
First Last

Mothers Name _____ Religion _____
First Last Maiden

Sacrament Information

Church of Baptism _____

Address of Church _____
Street City State Zip code

Date of Baptism ____/____/____ Were you baptized Catholic? _____

Have you made your First Eucharist? Yes _____ No _____ Date _____

Where? _____
Name of Church City State

Have you made your First Reconciliation? Yes _____ No _____ Date _____

Where? _____
Name of Church City State