

PERMANENT CONFIRMATION RECORDS INFORMATION

Please return this form to CCD Office by (or before) February 3, 2021

PLEASE PRINT/TYPE & BE ACCURATE!!!!

Full Name of Child to be Confirmed: _____

Saint's Name Chosen to be Confirmation Name: _____

****Please be sure you print the spelling of the chosen saint's name correctly.**

Home Address: _____

Age of Child the Day of Confirmation: _____

Date of Birth: _____

Date of Baptism: _____

Church Baptized (include full address):

Father's **Full** Name: _____

Mother's **Full** Name: _____

Mother's **Maiden** Name: _____

Confirmation Sponsor's Name: _____

Confirmation Sponsor's Address: _____

Proxy Sponsor's Name if Needed—(**NOTE:** This is **only** in the event that the sponsor cannot be present at Confirmation; such as illness, weather related travel, etc.)

Sacred Heart of Jesus, have mercy on us.

Immaculate Heart of Mary, pray for us.