

CONFIRMATION REGISTRATION FORM

Queen of Peace

566 Rosedale, Sarnia Ontario

519-337-7943

gofpeace@dol.ca

CANDIDATE'S NAME _____
First Last

FULL ADDRESS _____

PHONE # _____ **E-MAIL** _____

FATHER'S FULL NAME _____
First Last

MOTHER'S FULL NAME _____
First Last

CANDIDATE'S DATE OF BIRTH: _____
month day year

PLACE OF BIRTH (city): _____ **COUNTRY** _____

CANDIDATE'S DATE OF BAPTISM: _____
month day year

NAME OF THE CHURCH OF BAPTISM: _____

PLACE OF BAPTISM (city) _____

SCHOOL ATTENDING _____ **GRADE** _____

CHURCH YOU ATTEND ON SUNDAYS _____

CONFIRMATION NAME (Christian name) _____

SPONSOR'S FULL NAME & RELATIONSHIP _____
(Sponsor must be baptized & confirmed Catholic)

Signature of Candidate _____ Signature of Parent _____

Please attach a copy of the Baptismal Certificate.