

# THE SACRAMENT OF CONFIRMATION

Child's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ Parish: \_\_\_\_\_

Place of Baptism: \_\_\_\_\_

Parent 1 Full Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Parent 2 Full Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

**Godparent** - At least one must be confirmed Roman Catholic

Full Name of Godparent 1: \_\_\_\_\_ Religion: \_\_\_\_\_

Full Name of Godparent 2: \_\_\_\_\_ Religion: \_\_\_\_\_

Date of Parents Information Session: \_\_\_\_\_

Preparation Dates: \_\_\_\_\_

Date and Time of Confirmation: \_\_\_\_\_

Signature of Parent 1 \_\_\_\_\_

Signature of Parent 2 \_\_\_\_\_

Donations help support the Parish. It is customary to donate from \$100 which can be paid by cash or electronic transfer. We would appreciate your donation.

BSB: **083 347** Account No: **682 606 383** Reference: **CONF: NAME OF CHILD**