

CONFIRMATION CANDIDATE FORM 2011

DUE Aug. 2011 for those celebrating the Sacrament in November 2011

DIRECTIONS:

1. Fill out all information. (Please note any name changes, for example: if student's last name has changed since baptism.)
2. Please verify that you have the correct Baptism Date
3. If baptized at Guardian Angels, just hand in completed form by the above due date.
4. If NOT baptized at Guardian Angels, you need to attach a **copy of the certificate of baptism**.
This copy needs to be within the last **six months**: you need to call the church of baptism for a copy and they could mail it to you or fax it to us (651-738-2453).
5. Please verify that the address of the Church of Baptism on this sheet is correct.

(Please Print)

LEGAL NAME:

_____ FULL FIRST NAME MIDDLE LAST

(No nicknames or abbreviations)

CHOSEN CONFIRMATION NAME:

BIRTH DATE:

_____ month/day/year

BAPTISM DATE:

_____ month/day/year (please do not guess!)

CHURCH OF BAPTISM:

_____ Church Name Church Street Address

_____ Church City Church State Church Zip

MOTHER'S NAME:

_____ First Last Maiden

FATHER'S NAME:

_____ First Last

ADDRESS:

_____ Street City State Zip

PHONE NUMBER: () - _____

SPONSOR INFORMATION:

SPONSOR NAME:

_____ Full First Name Middle Last

ADDRESS:

_____ Street City State Zip

PHONE NUMBER: () - _____

For office use only:

Date Verified: _____ CURRENT Baptism Certificate Received: _____