



**SACRED HEART CATHOLIC CHURCH  
CONFIRMATION  
2017-2018**

Today's Date: \_\_\_\_\_ Parish Registration #: \_\_\_\_\_

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

*Please print name as you want it to appear on the certificate.*

Father's Name: \_\_\_\_\_

Mother's **MAIDEN** Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Dad: \_\_\_\_\_ Dad: \_\_\_\_\_

Mom: \_\_\_\_\_ Mom: \_\_\_\_\_

Date and place of Baptism: \_\_\_\_\_

Family email: \_\_\_\_\_

Candidate's School \_\_\_\_\_ Grade in 2017-2018 school year: \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Candidate received religious education **last year** at:

- Faith Formation: Sacred Heart Parish
- Faith Formation: \_\_\_\_\_
- Catholic School: \_\_\_\_\_

In order to serve your child to the best of our ability, it is necessary for the catechist to know your child's abilities. Please indicate below any learning disabilities, medical conditions or other issues which may require special attention during class sessions.

\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*OFFICE USE ONLY:*

Amount Due:   \$110.00   Amount Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Balance: \_\_\_\_\_

