

**HOLY SPIRIT CATHOLIC CHURCH
REGISTRATION
FOR
CONFIRMATION~~FALL 2011
(8th Grade and older)**

CANDIDATE'S Full Name _____ **Home Phone** _____

Address _____ **City** _____ **Zip** _____

Email _____

Mother's name & maiden name _____

Religion _____

Cell phone _____ **Work Phone** _____

Is it alright to call for other than emergency? Yes ___ No ___

Email _____

Address if different _____

Father's name _____

Religion _____

Cell phone _____ **Work Phone** _____

Is it alright to call for other than emergency? Yes ___ No ___

Email _____

Address if different _____

Please give the family name if different from Candidate _____

Name of Candidate's school _____ **Grade** _____

Candidate's birth date ____/____/____

Years of formal religious education (Catholic schools and/or parish religious formation programs) _____

Has First Eucharist been celebrated? Yes ___ No ___

First Reconciliation? Yes ___ No ___

Is your family registered in our parish? Yes ___ No ___

Other information that you can think would be of value to us? (All information will be treated with confidentiality.)

- **Please provide a copy of your Baptismal Certificate** Yes _____

Please check those areas in which you can help:

____ **Working as a classroom aide** ____ **Being available to help at special occasions**
____ **Offering driver services** ____ **Doing office work**
____ **Making phone calls** ____ **Other skills or talents you can share** _____

Preferred Night for Confirmation Course: 8 sessions- November- May

Sunday _____ **Thursday** _____

May be completed at a later date:

Name of Sponsor _____

Address _____ **City** _____

State _____ **Zip** _____

Home Phone (____) _____ - _____

Email _____

Confirmation Name: **Baptismal** _____ **Other** _____