

**APPLICATION FOR THE RECEPTION OF THE SACRAMENT OF CONFIRMATION**

PERSON TO BE CONFIRMED: \_\_\_\_\_  
*First Name* *Last Name*

SELECTED CONFIRMATION SAINT NAME: \_\_\_\_\_

CANDIDATE'S DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

CHURCH OF BAPTISM: \_\_\_\_\_ DATE: \_\_\_\_\_

\_\_\_\_\_  
*Street Address* *City* *State* *ZIP Code*

CHURCH OF FIRST COMMUNION: \_\_\_\_\_ DATE: \_\_\_\_\_

\_\_\_\_\_  
*Street Address* *City* *State* *ZIP Code*

HOME ADDRESS: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City* *State* *ZIP Code*

PHONE: \_\_\_\_\_

FATHER'S FULL NAME: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_  
*First Name* *Maiden Name*

MASS USUALLY ATTENDED: \_\_\_\_\_

NAME OF SPONSOR: \_\_\_\_\_

PARISH OF SPONSOR: \_\_\_\_\_

**NOTE: If the sponsor is not from Saint Ann's Church, Hampton, he/she is required to secure a Sponsor Certificate from his/her parish church. Please attach the completed Sponsor Certificate to this Application.**

We certify that the above information is correct. To the best of our ability we, the parents of the above child, will cooperate in this program and encourage the maximum involvement of our son/daughter.

\_\_\_\_\_  
Signature of Parent Date

\_\_\_\_\_  
Signature of Parent Date

***This form, along with a Confirmation Fee of \$100, is due by November 18 2018 (Sun. class) or November 20, 2018 (Tues. class) to your child's Confirmation teacher. Alternatively, you may put these items in a plain envelope clearly marked "Saint Ann School of Religion" and place it in the collection basket at Mass. Thank you.***