



Confirmation Registration Form

Please complete this form and return it to the parish
(PLEASE PRINT)

Parish Information

Name of Parish: _____ City: _____

☐ I currently live within the territorial boundaries of the parish.

☐ I currently **do not** live within the territorial boundaries of the parish, but I am formally registered at the parish.

Child's Information

Full legal name of child:

First Name Middle Name(s) Last Name

☐ Male ☐ Female Date of Birth: _____ City of Birth: _____

Church of Baptism: _____ Date of Baptism: _____

Address of Baptismal Church: _____

Parent's Information

Mother (Full legal name & Maiden Name):

First Name Middle Name(s) Last Name (Maiden Name)

Religion: ☐ Roman Catholic Other: _____ ☐ None

Present Address: _____

Street City Postal Code

Phone: _____ Email: _____

☐ I am a parent of, or have legal custody of the child.

Father (Full legal name):

First Name Middle Name(s) Last Name

Religion: ☐ Roman Catholic Other: _____ ☐ None

Present Address: ☐ Same as mother's

Street City Postal Code

Phone: _____ Email: _____

☐ I am a parent of, or have legal custody of the child.

Eligibility of Godparent

Canon 892 Insofar as possible, there is to be a godparent for the person to be confirmed; the godparent is to take care that the confirmed person behaves as a true witness of Christ and faithfully fulfills the obligations inherent in this sacrament.

Canon 893 §1. To perform the function of godparent, a person must fulfill the conditions mentioned in canon 874 §1 (*see below*).

The following are the requirements in order for a Catholic to be a godparent (canon 874 §1):

- at least 16 years of age
- he/she has been fully initiated in the Catholic Church (received Baptism, Holy Communion, and Confirmation)
- in good standing with the Catholic Church: live a life of faith which befits the role to be undertaken; not under canonical penalty
- not the father or mother of the one to be confirmed

Godparent's Information

Godparent (Full legal name): _____ Age: _____
First Name Middle Name(s) Last Name

Current Parish: _____ City: _____

Present Address: _____
Street City Postal Code

Phone: _____ Email: _____

☐ Fulfills the requirements of canon 874.

Declaration

I, the undersigned, declare that the information on this form (Pages 1 & 2) is true and accurate.

Name (PLEASE PRINT): _____

Signature: _____ Date: _____