



The Parish of the Holy Cross
95 Old Nichols Road
Nesconset, NY 11767
631-265-2200

Confirmation Commitment Form

Child Information:

Child's Name: _____
(First) (Last)

School attending in Fall 2023: _____

Grade in Fall 2023: _____

Confirmation Name: _____

I chose this name because _____

Sponsor Information: A sponsor must be a practicing Catholic, at least 16 years old, and have received the Sacrament of Confirmation.

Sponsor's Name: _____

Sponsor's Address: _____

Sponsor's Parish: _____ Town: _____

Parent/Guardian Information:

Father's Name: _____
(First) (Last)

Mother's Name: _____
(First) (Maiden/before marriage)

Address: _____
(Street) (Town) (Zip)

Home phone: _____ Cell: _____ Email: _____

I/We request that my/our child, _____, complete Confirmation Preparation, and celebrate the Sacrament of Confirmation in the Spring of 2024. I/We will offer support, encouragement and good example as he/she continues to participate fully in the Holy Cross Confirmation Program.

Signature(s): _____