

STM Confirmation Registration

Name of Confirmation Candidate							
Age		Date of Birth		Grade		School	

Baptism Date		Parish of Baptism	
Date of First Communion		Parish of First Communion	

Note: Copies of Certificates will be required at the beginning of Confirmation Year 2

Father's Name	
Mother's Name	
Street Address	
City/State/Zip Code	

Father's Religion		Mother's Religion	
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Father/Mother/Candidate Name	Phone Number	Email (one required for online access to Chosen materials in English for Candidate)

Preferred Method of Communication: **Text** or **Email** or **Phone Call**

Preferred Language of Communication: **English** or **Spanish**

Emergency Contact Name	
Relationship	
Address	
Phone Number	
Email	