Holy Trinity Catholic Church
Confirmation Information sheet

Full name of candidate:

_____

Address: _____

City/State/Zip:_____

Phone numbers: _____

Email:_____

Date of Birth:_____   Age at Confirmation:_____

Place of Birth:_____

Place of Baptism:_____
<div align="center">(Name of Church)</div>

City/State of Baptism:_____

Father's Full Name:_____

Mother's full name:_____

Mother's maiden name:_____

Sponsor's name:_____

Confirmation Saint name: _____

<u>Please attach a copy of your Baptismal certificate to this form. Please have Sponsor return Affidavit and current Baptism Certificate with notations.</u>
<u>All are due to parish office no later than October 15</u>

Please check the religious program which your child attended last year:

_____   Holy Trinity Religious Ed – Grade _____

_____   Other – Provide Church Name/City and State

_____