

CONFIRMATION FOR ADULTS REGISTRATION

ALL INFORMATION MUST BE COMPLETED AND RECEIVED BY FRIDAY, MAY 4, 2012. THANK YOU.

Parish Name:

Address:

City

Zip:

Vicariate:

Phone:

Adult Confirmation Parish Coordinator/Phone & Email:

CANDIDATE'S PERSONAL INFORMATION

Name:

___ Mr.

___ Ms.

___ Mrs.

(First)

(Middle)

(Last)

Address:

(Street)

(City)

(State/Zip Code)

Date of Birth:

Language Spoken:

Access Information:

English _____

Spanish _____

Sighted Guide ___ ASL interpreter ___ Wheel chair access ___

Assisted Listening Device ___

Other (please specify): _____

Country of Birth:

CANDIDATE'S SACRAMENTAL RECORD

Church of Baptism:

Date of Baptism:

Church of
Baptism
Complete
Address:

Street:

City/State/zip code (or Country):

Will the Candidate make his/her First Holy Communion? _____ Yes _____ No

Candidate's Full Name (as it appears on the Baptismal Certificate):

Confirmation Name:

Sponsor's Name and Parish:

ATTACHMENTS

—Candidate's Baptismal Certificate

—Certificate or Letter of Eligibility for sponsors (only 1 sponsor per candidate)

Pastor's signature

Parish Seal

Return this form and attachments to the **Office for Divine Worship, 222 N. 17th Street, Philadelphia, PA 19103**

Adult Confirmation will be celebrated at the Cathedral Basilica of Ss. Peter and Paul on **Sunday, May 27, 2012** at 6:30 p.m.