

## CONFIRMATION NAME INFORMATION

Completed forms should be returned to your Religion Teacher OR to the Saint Cecilia Parish Office NO LATER THAN Monday, December 1, 2009.

### INFORMATION ON CANDIDATE

\_\_\_\_\_  
Name (First, Middle, Last – no nicknames, please) \_\_\_\_\_  
Age

\_\_\_\_\_  
Name(s) of Parent(s) or Guardian(s) presenting child for sacrament

\_\_\_\_\_  
Street Address \_\_\_\_\_  
Apt. #

\_\_\_\_\_  
City Zip \_\_\_\_\_  
Home Phone

**The NAME I have chosen for Confirmation is:** \_\_\_\_\_  
(ONE NAME ONLY)

The full name of my Confirmation Sponsor is:  
\_\_\_\_\_  
(First, Middle, Last – no nicknames, please)

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### INFORMATION FROM RECORD OF CATHOLIC BAPTISM OR PROFESSION OF FAITH FOR CANDIDATE

\_\_\_\_\_  
Name of Catholic Church \_\_\_\_\_  
Date of Sacrament

\_\_\_\_\_  
City and State of Church of Baptism

\_\_\_\_\_  
Full Maiden Name of Mother on Baptismal Record

\_\_\_\_\_  
Full Name of Father (Parent, not priest) on Baptismal Record