

Confirmation Information

Please complete the following form and return it to the Religious Education Office by **March 1, 2010**.

PLEASE PRINT CLEARLY, THE NAME YOU WRITE HERE IS THE NAME THAT WILL APPEAR ON THE CERTIFICATE & BOOKLET



Student's Baptismal & Family Name: _____
(First) (Last)

Current Address: _____
(Street) (Town)

Phone Number: _____

E-Mail Address: _____ (using for reminders)

Confirmation Name: _____

Age as of October 2010: _____ Birth Date: _____

Hospital Name: _____

(City) (State)

Church of Baptism: _____

(if baptized outside of New Jersey please give us the exact address; we need to send the parish your child's confirmation information)

(Street) (City) (State & Zip Code)

Date of Baptism: _____

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

Mother's **Maiden** Name: _____
(First) (Maiden)

Sponsor (**cannot be a parent**): _____

Need a Copy Certificate: _____ Baptism, _____ Communion, or _____ Penance

If the above is checked please write the parish in which your child received the sacraments for a copy of their certificates if you do not have one. If they do not issue certificates for Penance, a letter from them stating the child received Penance there and the date will be sufficient. Please send these copies to the Religious Education Office.

A fee of **\$100.00** is necessary to help cover the cost of Confirmation certificates, booklets, flowers, diocesan fee, Confirmation reception, supplemental retreat fee, corsages, boutonniers, mailings, etc. If there is any difficulty regarding this fee, please call our office. Please return this fee with the above requested information. There will be a separate Confirmation retreat fee which will be noted at a later date.

_____ I have enclosed the **\$100.00** fee – checks made payable to St. Catharine