



# Confirmation Registration Form

Please complete this form and return it to the parish  
(PLEASE PRINT)

## Parish Information

Name of Parish: \_\_\_\_\_ City: \_\_\_\_\_

- I currently live within the territorial boundaries of the parish.
- I currently do not live within the territorial boundaries of the parish, but I am formally registered at the parish.

## Child's Information

Full legal name of child:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Church of Baptism: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_

Address of Baptismal Church: \_\_\_\_\_

\_\_\_\_\_

## Parent's Information

**Mother** (Full legal name & Maiden Name):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Religion:  Roman Catholic Other: \_\_\_\_\_  None

Present Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

- I am a parent of, or have legal custody of the child.

**Father** (Full legal name):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Religion:  Roman Catholic Other: \_\_\_\_\_  None

Present Address:  Same as mother's

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

- I am a parent of, or have legal custody of the child.

### Eligibility of Godparent

Canon 892 Insofar as possible, there is to be a godparent for the person to be confirmed; the godparent is to take care that the confirmed person behaves as a true witness of Christ and faithfully fulfills the obligations inherent in this sacrament.

Canon 893 §1. To perform the function of godparent, a person must fulfill the conditions mentioned in canon 874 §1 (*see below*).

The following are the requirements in order for a Catholic to be a godparent (canon 874 §1):

- at least 16 years of age
- he/she has been fully initiated in the Catholic Church (received Baptism, Holy Communion, and Confirmation)
- in good standing with the Catholic Church; live a life of faith which befits the role to be undertaken; not under canonical penalty
- not the father or mother of the one to be confirmed

### Godparent's Information

Godparent (Full legal name): \_\_\_\_\_ Age: \_\_\_\_\_

First Name

Middle Name(s)

Last Name

Current Parish: \_\_\_\_\_ City: \_\_\_\_\_

Present Address: \_\_\_\_\_

Street

City

Postal Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Fulfills the requirements of canon 874.

### Declaration

I, the undersigned, declare that the information on this form (Pages 1 & 2) is true and accurate.

Name (PLEASE PRINT): \_\_\_\_\_

Signature:  Date: \_\_\_\_\_