

**St. James Confirmation  
Registration Form - 2017**

Participants Full Name: \_\_\_\_\_ Gender M/F

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

Postal Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ (as of Sept 2017)

Confirmation Name (when chosen): \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_

Proxy (stand in person if needed): \_\_\_\_\_

**Family Information**

Mother's Name: \_\_\_\_\_ email \_\_\_\_\_ cell \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_ email \_\_\_\_\_ cell \_\_\_\_\_

**Sacrament History**

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

Church of First Reconciliation \_\_\_\_\_

Church of First Communion \_\_\_\_\_

Copy of Baptismal Certificate Attached Y/N

Does your family attend Sunday Mass here at St. James Yes      No

If not, do you attend Sunday Mass at another parish? Where? \_\_\_\_\_

**\*PARENTS ARE REQUIRED TO BE ACTIVELY INVOLVED WITH THE CLASSES. A PARENT MUST ATTEND EACH CLASS WITH THEIR CHILD.**