



St. James Catholic Church

Sacrament of Confirmation Registration Form - 2024

Child's Full Name: _____ Gender: M ☐ F ☐

Address: _____

Postal Code: _____ Home Phone Number: _____

School: _____ Grade: _____

Confirmation Name (selected later): _____

Sponsor's Name (selected later): _____

Proxy (stand in person if needed): _____

Family Information (PLEASE MARK PREFERRED EMAIL FOR COMMUNICATIONS)

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: Yes ☐ No ☐

(If not baptized at St James, a copy of the student's baptism certificate is required.)

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

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

*This is a parent/child program. One parent or guardian attends the monthly in-class sessions with the student. Remainder of the sessions will be completed at home online. Further instructions will be sent via email once registration form is received.

Registration and Information Session is Thursday, January 11 at 7:30pm.