

Confirmation Candidate Information

Saint Michael the Archangel Parish

Confirmation



PLEASE PRINT

Name _____

Address _____

_____ *Zip Code* _____

Phone number _____

Age on Confirmation date _____

Father's Name _____

Mother's first name _____ *Mother's Maiden Name* _____

Confirmation Name _____

Sponsor's Name _____

Baptism:

Church _____

Address _____

_____ *Zip Code* _____

Date: ___ / ___ / ___