

A copy of the Baptism Certificate is required at the time of registration.

CORRECT SPELLING OF ALL NAMES IS VERY IMPORTANT. PLEASE PRINT CLEARLY.

Name of Candidate: _____ M F
Last Name Given Name(s)

Birth: ____/____/____ **Place of Birth:** _____ **Age at Confirmation:** ____
Date (dd/mmm/yy) City/Town Province

Baptism: ____/____/____ _____
Date (dd/mmm/yy) Name of Church Mailing Address of Church

City/Town Province/County Postal Code/Zip Code

School Attending: _____ **Grade:** _____ **Copy of BC:**

Father: _____
Last Name Given Name(s) Religion

Mother: _____
Maiden Name Given Name(s) Religion

Home Address: _____
Street Address City/Town Province Postal Code

Email(s): **Mother** _____ **Father** _____

Phone: Home: _____ Home: _____
 Work: _____ Work: _____

Was the person baptized in an Eastern Catholic Church? Yes No
 If yes, Confirmation was conferred at the time of Baptism, **the Sacrament of Confirmation is not repeated.**

Was the person Baptized in the Orthodox Church? Yes No
 If yes, the person making a Profession of Faith is acribed to the corresponding Eastern Church *sui iuris* within the Catholic Church and Confirmation was conferred at the time of Baptism, **the Sacrament of Confirmation is not repeated.**

Was the person baptized in another Christian ecclesial community? Yes No
 (A copy of certificate is required)

If Yes _____
Denomination Name of Church City/Town Province

When making a Profession of Faith the child is received into the Roman Catholic Church.

Has the person received First Reconciliation? Yes No
Has the person received First Holy Eucharist? Yes No



The Catholic
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 of Edmonton

SPONSOR:

It is desirable that the sponsor chosen be the one who undertook this role at baptism (c.893 §2). One sponsor, male or female, is sufficient. (cf. c.873) but there may be two, one of each sex (c.873). The sponsor **must NOT** be either the father or the mother of the one to be confirmed (c.874 §1,5°). The sponsor **must** have received the sacraments of Baptism, Confirmation and Eucharist, be a practicing Catholic, and be at least 16 years of age (c.874).

First Sponsor:

_____ M F Testimonial of Suitability by Parent(s) Yes
Last Name First Name

Second Sponsor (optional)

_____ M F Testimonial of Suitability by Parent(s) Yes
Last Name First Name

Permission of Parent for a child under the age of 14 years, to make a Profession of Faith

_____ Father's Signature Mother's Signature

For Parish Office Use Only

Proposed Date of Confirmation : _____
(dd/mmm/yy)

Proposed Place of Confirmation: _____

To be conferred by: _____

Permission to confer the Sacrament of Confirmation granted on: _____ to:
(dd/mmm/yy)

_____ by _____
Name of Priest Archbishop / Delegate Received by: Initials



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