

## Cathedral Diocesan Confirmation Form

Please submit the completed form for each Catholic candidate and/or the candidates of your parish youth Confirmation class who wish to be confirmed at the Cathedral on **Sunday, November 18, 2018 at 3:00 p.m.** during the Diocesan Confirmation Mass. The completed form is due **October 19, 2018**. Incomplete information may result in Confirmation being postponed.

### **Parish Coordinator** *(please type or print neatly)*

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ email \_\_\_\_\_

Phone \_\_\_\_\_ Name of parish \_\_\_\_\_ City \_\_\_\_\_

### **Candidate for Confirmation – required information**

Full name (first, middle, last) \_\_\_\_\_

Full name at Baptism (if different from current name) \_\_\_\_\_

Chosen Confirmation name *(if different from baptismal name)* \_\_\_\_\_

Date and year of birth \_\_\_\_\_ date and year of Baptism \_\_\_\_\_

Current Address \_\_\_\_\_

Church of Baptism (name, street address, city/state/country) \_\_\_\_\_

Attach a copy of the baptismal certificate \_\_\_\_\_ Grade level (for youth only) \_\_\_\_\_

Father's name (first and last) \_\_\_\_\_

Mother's name (first, last and MAIDEN name) \_\_\_\_\_

Sponsor's name (first, last) \_\_\_\_\_

Relationship of sponsor to the candidate *(a parent may not sponsor their child)* \_\_\_\_\_

Has the candidate received first Holy Communion?     yes     no

**The Pastor's signature is required verifying that the candidate has been prepared and is properly disposed to receive the Sacrament.**

Pastor \_\_\_\_\_

You may FAX the completed form and copy of the baptismal certificate to the Office of Worship at 269-349-6440 no later than four weeks before the Confirmation Mass or mail them to the Office of Worship, 215 N. Westnedge Avenue, Kalamazoo, MI 49007-3760.