



St. Simon and St. Jude Parish
Confirmation: The Gift of God's Spirit !

Parish phone (519) 728-3381 • Fax (519) 728-1772

REGISTRATION FORM - SACRAMENT OF
CONFIRMATION NOVEMBER 2018

Name of Family Parish: St. Simon and St. Jude Other : _____

Candidate's School: _____ Teacher: _____

Candidate's Full Name _____
(First name) (Middle name(s)) (Family name)

Home Address: _____

Town _____ Postal Code: _____ Home Phone# _____

Mobile or other Contact numbers: 1. _____ 2. _____

Family e-mails: 1. _____ 2. _____

Candidate's Date of Birth: _____ Date of Baptism: _____

Church of Baptism: _____

Has your Child made his/her First Communion? Yes No

Date of First Communion: _____ Church: _____

Father's Full Name _____

Father's Address: (If different from Candidate's) _____

Mother's Full Name: _____ Mother's Maiden Name: _____

Mother's Address: (if different from Candidate's)) _____

Name of Candidate's Confirmation Sponsor(s) _____
(Sponsors are 16 years of age or older, and Confirmed Roman Catholic)

Child's Height: _____ (Needed for Confirmation gown)

PLEASE SEE REVERSE SIDE OF PAGE TO COMPLETE REGISTRATION....

Please bring this completed form with you to the Parents' Meeting on Wednesday, September 19, 2018, at 7:00 PM in the Parish Hall to register your child for Confirmation.

CHECK LIST OF ITEMS TO ATTACH TO THIS FORM:

- **\$50** Confirmation registration fee to help offset cost of programme materials, retreat and confirmation gown. Cheques may be made payable to "St. Simon and St. Jude Parish".
- Attached photocopy of your child's baptismal certificate if your child was baptized at a parish other than St. Simon and St. Jude. A copy only please –not the original. This "Proof of Baptism" document is needed for confirmation to take place.
*If you haven't a copy of your child's baptismal certificate, you might connect with the church where your child was baptized to fax or provide you with a new document.
- If your child has not been baptized, please contact Mrs. Marguerite Hewer at the parish office. 519-735-9517 ex. 22. We're happy to assist!

**** Any additional information, or special needs you would like us to be aware of? ****

Please include on the lines provided:

Thank you. We support you and look forward to this important Faith Journey with your family!

OFFICE USE ONLY:

DATE REGISTRATON RECEIVED: _____ PAYMENT RECEIVED? _____
