

St. Christopher Confirmation Program
Registration Form – 2018

Due: March 12, 2018

Full name of Confirmandi: _____

Confirmation Name: _____

Father's name: _____

Mother's maiden name: _____

Home phone: _____

Home address: _____

City, State, Zip _____

Parent email: _____

Sponsor's name: _____

Sponsor's mailing address: _____

City, State, Zip _____

Will you need to order a robe? Y / N If yes, how tall are you? _____

I have a sibling or a relative who is an altar server and would be willing to serve at my Confirmation mass (name of sibling or relative)

I am interested in doing a reading at my Confirmation mass (y/n) _____

(If no one volunteers, I will pick four people.)

I am interested in helping to bring up the gifts at my Confirmation mass (y/n) _____

(If no one volunteers, I will pick four people.)

Office Use Only

Youth Alive Requirements Completed: Y _____ N _____

Fee Paid/Date: _____

Robe Height: _____