

Sacramental Candidate Information Sheet

Please Print

Child's Full Name _____ M ____ F ____

Father's Name _____

Mother's Name _____

Mother's Maiden Name _____

Address _____

Phone _____

Child's Date of Birth _____

Church of Baptism _____

Church Address _____

City State

Date of Baptism _____

Child's Confirmation Name _____

**(The Baptismal name is recommended. Choose one name only- either the first or middle name, or a new name.)

Name of Confirmed Confirmation Sponsor _____

**(Parents may not be sponsors but you may choose a relative or someone from your parish.
Sponsors need to be confirmed Catholics at least 16 years old and practicing members of the church)

Relationship to Child _____

**PLEASE ATTACH A COPY OF YOUR CHILD'S BAPTISMAL CERTIFICATE
IF HE OR SHE WAS NOT BAPTIZED AT ST. JOHN'S**