

CONFIRMATION INFORMATION SHEET

FULL NAME OF CANDIDATE _____

CANDIDATE'S CONFIRMATION NAME _____

CANDIDATE'S DATE OF BIRTH _____

CANDIDATE'S HOME PHONE # _____ CELL # _____

NAME OF SPONSOR _____

ADDRESS OF SPONSOR _____

STREET _____

CITY _____ STATE _____ ZIP _____

SPONSOR'S PHONE # _____

- SPONSOR MUST BE AT LEAST 16 YEARS OF AGE**
- A PRACTICING CATHOLIC**
- CANNOT BE THE PARENT OF THE CANDIDATE**

IS SPONSOR A MEMBER OF HOLY INNOCENTS PARISH? YES _____ NO _____

IF NO, SPONSOR MUST OBTAIN A LETTER OF ELIGIBILITY FROM HIS/HER PARISH. (ATTACH TO THIS FORM.)

CANDIDATE'S FATHER'S NAME _____

CANDIDATE'S MOTHER'S FIRST & MAIDEN NAME _____

CANDIDATE'S DATE OF BAPTISM _____

CANDIDATE'S CHURCH OF BAPTISM _____

STREET

CITY _____ STATE _____ ZIP