

St. Patrick's Catholic Church  
Faith Formation

**SACRAMENT PREPARATION**  
**REGISTRATION**

CANDIDATE'S FULL  
NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

PHONE NUMBERS:

(h) \_\_\_\_\_ (w) \_\_\_\_\_ (Cell) \_\_\_\_\_

EMAIL: \_\_\_\_\_

**BAPTISM INFORMATION: (\*copy of certificate needed if  
sacrament not received at St. Patrick's)**

BIRTH DATE \_\_\_\_\_ BAPTISM DATE \_\_\_\_\_

CHURCH OF BAPTISM: \_\_\_\_\_

CHURCH ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

MOTHER'S MAIDEN NAME \_\_\_\_\_

**CONFIRMATION INFORMATION:**

CONFIRMATION NAME \_\_\_\_\_

SPONSOR'S NAME \_\_\_\_\_

SPONSOR'S ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

ARE THEY MEMBERS AT ST. PATRICK'S? \_\_\_\_\_  
(if not, a letter is needed from their parish granting permission to  
be a sponsor)

**MATERIALS FEES:**

YEAR ONE: FIRST RECONCILIATION \$25 \_\_\_\_\_

YEAR TWO: CONFIRMATION/ FIRST EUCHARIST \$35 \_\_\_\_\_