CONFIRMATION REGISTRY BOOK INFORMATION

This information about the confirmation candidate is used to enter the information into our sacramental register. Please Print Clearly

First Name: _____

Middle Name: _____

Last Name: _____

Confirmation Name: _____

Birthdate: _____ Age: _____

Date of Baptism: _____

Name of Baptismal Church:

_____

Address (include the zip code) of Baptismal Church:

_____

_____

<u>Birth Parents' Names</u>

Mother's First & **<u>MAIDEN</u>** Name:

_____

Father's First & Last Name:

_____

Your Address:

_____

Sponsor's First & Last Name:

_____

Please return this form by <u>December 4, 2023</u> to:

St. Matthew Parish 1001 E Schaumburg Road . Schaumburg, IL 60194