

Saint Philip Catholic Church
Falls Church, Virginia



CONFIRMATION REGISTER INFORMATION FORM

NAME: _____

LAST

First

Middle

Date of Birth: _____ Age at Confirmation: _____

Church of Baptism: _____

City/State of Church of Baptism: _____

Date of Baptism: _____

Residence/Address: _____

Telephone: _____

Church and Year of First Penance: _____

Church and Year of First Eucharist: _____

PATRON SAINT: _____

FATHER'S NAME: _____

LAST

First

Middle

MOTHER'S NAME: _____

MAIDEN

First

Middle

SPONSOR'S NAME: _____

LAST

First

Middle

Will a Proxy stand in for the Sponsor? _____ YES _____ NO

PROXY'S NAME: _____

LAST

First

Middle

- Yes. I have attached a birth certificate (if not already on file).
- Yes. I have attached a Baptism certificate (recently issued if age 16 or older).
- Yes. I have attached my Sponsor's certificate or affidavit for my Proxy (if needed).

I verify that my child has not already been Confirmed and I give permission for my child to be Confirmed. Parent Signature: _____ Date: _____

OFFICE USE

Date of Confirmation: _____ Minister: _____ Bapt. Reg. Pg.: _____

- Certificate made and sent
- Notation in Baptismal Register/Sent
- Update parish database