Sacred Heart Catholic Church 1115 South 8th Avenue East PO Box 1478 Newton, IA 50208-1478 641-792-2050

Confirmation Registration Year 2025-2026

Please complete this form and return it to the Faith Formation Office.								
Student Information								
	Full Nam	ie	Date of Birth	Age	Place	e of Birth	Grade	
Baptism Information (Please attach a copy of certificate if at any other church than Sacre						red Heart, Newton, I/	A.)	
Date		Church			City, State, Zip			
Confirmation Information								
Confirmation	n Name:							
Sponsor'	's Name:							
Sponsor's A	Address:		_	_			_	
Sponsor's P	Phone #:				Sponsor's Age:			
Sponsor's	Church:							
Parent Infor	rmation	Mother (Maiden I	Mother (Maiden Name)		Father			
Name								
Address								
Phone #								
Email								
Religion								
	Child lives with: ☐ Both parents ☐ Mother ☐ Father							
	Parents are: ☐ Married ☐ Divorced ☐ Separated ☐ Widowed ☐ Single							
Do you as a family, attend Sunday Mass on a weekly basis? YES NO								
Confirmation Class Registration Fee - \$20.00								
	」 \$20.00 c	cash enclosed			\$20.00 ched	ck enclosed		
☐ I would like to request assistance								