

HOLY GHOST CHURCH
2025-2026 Registration form for Religious Education

ADULT CONFIRMATION

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➡ Student would like to take the class in: ☐ English ☐ Spanish

Name of Student: _____
First Middle Last

Place of Work: _____

And/Or
Name of School if Attending: _____ Age: _____

Sacraments you have received: ☐ Baptism ☐ Reconciliation (First Confession)
☐ Eucharist (First Communion) ☐ Marriage (In the Catholic Church)

Marital Status: ☐ Married in the Catholic Church ☐ Married Civilly ☐ Widowed
☐ Separated ☐ Divorced ☐ Living Together ☐ Single

Is your family registered at Holy Ghost? ☐ Yes ☐ No Envelope #: _____

Address: _____ Zip Code: _____

Cell Phone #: _____ Texting: ☐ Yes ☐ No

E-Mail Address: _____

Date of Birth: _____ Place of Birth: _____

Date of Baptism: _____ Church of Baptism: _____

Address of Church of Baptism: _____

Name of Mother: _____ Religion: _____

Sacraments received: ☐ Baptism ☐ Reconciliation ☐ Eucharist ☐ Confirmation
☐ Marriage (In the Catholic Church)

Name of Father: _____ Religion: _____

Sacraments received: ☐ Baptism ☐ Reconciliation ☐ Eucharist ☐ Confirmation
☐ Marriage (In the Catholic Church)

In Case of Emergency Please Contact: _____

Relationship to you: _____ Phone #: _____

Name of Saint for your Confirmation: _____
(If you do not know yet, it is a good idea to start researching saints)

Name of Sponsor: _____
(You only need one person to be your Sponsor)

Please list any allergies, chronic conditions, illnesses or special needs that you have:

Holy Ghost Church may take and use photos of me during class, retreats, and other events. These photos may be used in various publications of the Archdiocese, which includes the church bulletin board:

Yes _____
Signature

No _____
Signature

Registration Fee (Must be paid at the time of registration)

\$50 per student for registered families

\$80 per student for Non-registered families

**A copy of the Certificate of Baptism, First Communion and the Birth Certificate
must be turned in with the registration form**

Office Use Only

☐ Parish Member \$50 ☐ Non-Parish Member \$80 ☐ Cash ☐ Check ☐ Money Order ☐ myEoffering:
Receipt #: _____

Amount Received: \$ _____

Date Received: _____

Baptism Certificate: ☐ Yes ☐ No First Communion Certificate: ☐ Yes ☐ No Birth Certificate: ☐ Yes ☐ No