Adult Confirmation Form



Information on this form is held in confidence and is not shared without your permission.

Today's Date:_____

NAME: _____
First Middle Last (Maiden)

Date of Birth:_____Age:_____

Place of Birth:_____
[include **locality** (town, city, county, etc.) **region** (state, province, etc.) and **country**]

Name of Father:_____

Name of Mother:_____

CONTACT INFORMATION

Full Mailing Address:_____

_____

Phone: (Daytime)_____(Evening/Weekend):_____

Cell Phone:_____Occupation:_____

Email: (Home)_____(Other):_____

RELIGIOUS HISTORY

1. **What, if any, is your present religious affiliation?**_____

2. **Have you ever been baptized? _____Yes _____No _____I am not sure**
   If you answered "Yes" to Question 2, please provide the following information:

   (a) In what denomination were you baptized?_____

   (b) Date or your approximate age when you were baptized:_____

   (c) Baptismal name (if different from current name):_____

   (d) Place of Baptism (name of church/denomination):_____

   (e) Address, if known:_____

   (f) Location, if known:_____
   [include **locality** (town, city, county, etc.) **region** (state, province, etc.) and **country**]

3. **If you were baptized as a Catholic, check those sacraments you have already received:**
   _____Reconciliation (Confession) _____Eucharist (First Communion) _____Confirmation

CURRENT MARITAL STATUS

Check the appropriate statement(s) below and provide any information requested beneath each statement.

- ☐ **I have never been married.**

- ☐ **I am engaged to be married.**

  Your fiancé(e)'s Name:_____

  Your fiancé(e)'s current religious affiliation (if any):_____

  For you: _____This is my first marriage. _____I have been married before.

  For your fiancé(e): _____This is his/her first marriage. _____My fiancé(e) has been married before.

- ☐ **I am married.**

  Your spouse's name:_____

  Your spouse's current religious affiliation (if any):_____

  For you: _____This is my first marriage. _____I have been married before.

  For your spouse:_____This is my spouse's first marriage. _____My spouse has been married before.

  Date of marriage:_____

  Place of marriage:_____

  [include **locality** (town, city, county, etc.) **region** (state, province, etc.) and **country**]

  Officiating authority of marriage:_____

  (civil government, non-Christian minister, Christian minister, Catholic cleric)

- ☐ **I am married, but separated from my spouse.**

- ☐ **I am divorced and I have not remarried.**

- ☐ **I am a widow/widower and have not remarried since my spouse's death.**

FAMILY INFORMATION

List the name(s) of any children or other dependents (e.g. daughter-Jane; Stepson-John).

Relationship:_____Name:_____Age:_____

Relationship:_____Name:_____Age:_____

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Relationship:_____Name:_____Age:_____

Relationship:_____Name:_____Age:_____

Relationship:_____Name:_____Age:_____

FAITH ASSESSMENT

1. **Religious upbringing at early childhood, as a child and adolescence:**

2. **Where did you learn about your Catholic faith?**

3. **Describe your journey in the past few months.**

4. **Are you ready to receive the Sacrament of Confirmation? Why?**

5. **What are some of the questions or concerns you have about the Catholic Church?**

6. **Do you attend Saturday Vigil or Sunday Mass? Weekly Usually Seldom Never**

7. **Are you currently active in the parish? If no, how would you like to be involved in the life of the parish?**