

## Adult Confirmation Registration

Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Address \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 City \_\_\_\_\_ ZIP \_\_\_\_\_  
 Email address \_\_\_\_\_

Can we call you at work? If so, work phone \_\_\_\_\_

- Mass attendance  Every Sunday  Usually  Seldom  
 Where have you learned about your religion?  
 Family  Catholic School Number of years \_\_\_\_\_  
 Religious Education Number of years \_\_\_\_\_
- How are you currently active in your parish?
- Why did you decide to receive the sacrament of Confirmation at this time?
- What questions about your faith do you have at this time? (use back side)

### Information for Parish Sacramental Records:

5. Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_  
 Father's name \_\_\_\_\_ Religion \_\_\_\_\_  
 Mother's name \_\_\_\_\_ Religion \_\_\_\_\_  
 Mother's maiden name \_\_\_\_\_

6. Baptism information:

What religion: \_\_\_\_\_ Date of baptism \_\_\_\_\_  
 Church of baptism: \_\_\_\_\_  
 Address \_\_\_\_\_

If baptized in another religion, have you made a Profession of Faith in the Catholic Church?  
 Yes  No  If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_

7. Have you made your First Communion? Yes  No  If yes, Where \_\_\_\_\_ When \_\_\_\_\_

8. Marriage Status

- |  |  |
|--|--|
| <input type="checkbox"/> I am not married                | <input type="checkbox"/> I have never been married         |
| <input type="checkbox"/> I am married                    | <input type="checkbox"/> I have been married only once     |
| <input type="checkbox"/> I was married                   | <input type="checkbox"/> I am presently separated          |
| <input type="checkbox"/> I am divorced but not remarried | <input type="checkbox"/> I am divorced and remarried       |
|  | <input type="checkbox"/> My spouse has been married before |

If you are married, were you married in the Catholic Church Yes  No

If no, where were you married? \_\_\_\_\_

If currently married, is your spouse baptized? Yes  No  If yes, what faith? \_\_\_\_\_

Spouses name \_\_\_\_\_

re: Adult Confirmation

The items on this check list are needed to complete the documentation required for you to receive Confirmation.

- Baptism Certificate
- First Communion Certificate
- Must go to Confession
- You have to pick a Saint's Name for your Confirmation name

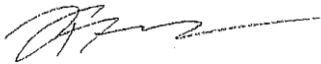
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Saint's Name

- Sponsors Name (See Sponsor registration form)

If you have any questions please email: [bill@sjwchurch.com](mailto:bill@sjwchurch.com) or [jpf@sjwchurch.com](mailto:jpf@sjwchurch.com) please make the Subject line "Adult Confirmation."

Sincerely,



J.P. Fernandez,  
Youth Ministry/Confirmation



Bill Sparks  
Formation Director

# Sponsor Information

## *To be completed by the Sponsor!*

In preparation to take part in a sacrament of the Catholic Church. The Catholic Church believes that being a Sponsor is an extremely important role. Because of the importance attached to this role, the Church asks that you as a Sponsor meet the following requirements:


1. Be at least 16 years old.
2. Not be a parent of the child.
3. Be already strengthened yourself with the sacraments of **Baptism, Confirmation, and First Holy Communion.**
4. Be committed to a life in harmony with the faith and your role.
5. Be willing to accept, freely, the responsibility of supporting this family and the child in the faith.

By my signature I attest and affirm that I meet with the requirements to be a Sponsor in the Catholic Church.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Congratulations! This is a great moment in your life. To be selected as a Sponsor is a great privilege. At the same time, it carries profound responsibility because it is in a real sense a spiritual parenthood. Through prayer, word, example, and companionship with the one you sponsor, you are asked to show in a very personal way what it means to be a follower of Christ on His Way of Love. You must be for the one you sponsor a teacher and a role model in the ways of this belief. This is a serious commitment and a lifelong relationship! May this deep sharing of faith be for you and the one you sponsor a means of spiritual growth.

Name of the Person You Will Sponsor:		Relationship to the Person You Will Sponsor:	
Your Name (Please Print):			Age:
Address:			
City:		State:	Zip Code:
Home Phone:		Cell Phone:	
Email Address:			
Church Where You Are a Registered Member or Are Attending Mass:			
✝ Baptized <input type="checkbox"/> Yes <input type="checkbox"/> No, Church of Your Baptism:			
City:		State:	
✎ Confirmed <input type="checkbox"/> Yes <input type="checkbox"/> No, Church of Your Confirmation:			
City:		State:	
 Marriage: <input type="checkbox"/> Single <input type="checkbox"/> Married Church <input type="checkbox"/> Married Civil If you are married in the Church, Please provide a copy of your marriage certificate. If you were you married in the Church, were you married in the Catholic Church: <input type="checkbox"/> Yes <input type="checkbox"/> No,			
Church where you were married:			
City:		State:	