



**CONFIRMATION YEAR ONE REGISTRATION / 8TH GRADE**

**This form MUST be completed and returned to the Religious Education Office.**

**A copy of baptism certificate MUST be attached. Please write clearly.**

Family Name: \_\_\_\_\_

Family Mailing Address: \_\_\_\_\_

Is your family registered at St. Helen Church? YES NO

If YES, what is your parish ID number: \_\_\_\_\_

*If you do not know your parish ID, please call the Church office at 567-5129*

Candidate's Name: \_\_\_\_\_ Gender: MALE FEMALE

Candidates Cell: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Include area code for texting purposes

Church of Baptism / Address: \_\_\_\_\_

Candidate's School presently attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Candidates Date of Baptism: \_\_\_\_\_

Godmother's Name: \_\_\_\_\_ Godfather's Name: \_\_\_\_\_

Received First Eucharist? YES NO Received First Reconciliation? YES NO

Father's Full Name: \_\_\_\_\_

Father's Cell: \_\_\_\_\_

Father's Religious Affiliation: \_\_\_\_\_

Father's Email: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Mother's Religious Affiliation: \_\_\_\_\_

Mother's Cell: \_\_\_\_\_

Mother's Email: \_\_\_\_\_