

HOLY NAME CATHEDRAL

RECORD OF CONFIRMATION, 2019

PLEASE PRINT CAREFULLY

Name (first and last) _____

Address _____ Phone _____

City, State, Zip Code _____

e-mail address _____

Date of birth _____ Age _____ Place of Birth _____

Name of Parish Currently Attending _____

BAPTISM:

We need your parents' names.

Father's First & Last Name _____

Mother's First & **Maiden Name** _____

It is very important that we have the address of the church if it does not appear on your baptismal certificate.

Church _____

Address _____

City/State _____ Zip _____

Date of Baptism _____

FIRST COMMUNION: Have you received First Communion? _____

Date _____

*Drop off form at the Parish Offices or mail form to 730 N. Wabash, Chicago, IL 60611

Please make sure to attach a copy of your baptism certificate to the form.

Office Use Only:

Confirmation Sponsor's Name: _____

Name to be taken at Confirmation: _____