

CONFIRMATION REGISTRATION FORM
Prince of Peace

Name of Candidate: _____

Parent(s) or Guardian Name: _____

Address: _____

_____ Zip: _____

Home Phone: _____ Parent /Work: _____ Cell: _____

Email Addresses (Youth): _____ (Parents) _____

Date of Birth: _____ Grade: _____

Date of Baptism: _____ Location: _____

(Include a copy of Baptismal Certificate with this form if Candidate was **NOT** baptized at Prince of Peace)

Date of First Eucharist: _____ Location: _____

Is there a parent living outside the candidate's home that should to be informed of this program? Yes: _____ No: _____

Parent Name: _____ Phone: _____

Address: _____

_____ Zip: _____

SPONSOR INFORMATION: Please note – Sponsor CANNOT be a candidate's parent. He/she must be at least 16 years old, Confirmed and practicing Catholic.

Sponsor's Name: _____ Phone: _____

Relationship to Candidate: _____

Address: _____

_____ Zip: _____

Other Notes: _____

Fee: \$95.00 = includes cost of retreat, materials, and group photo. This fee covers any other children in family attending Religious Education.