

St. Rose of Lima Confirmation Program
312 Ridgedale Avenue
East Hanover, NJ 07936
973-887-5572/973-599-2944

Sacramental Information Form SPRING 2020

**PLEASE DO NOT RETURN THE FORM UNLESS COMPLETE WITH ANY
NECESSARY SIGNATURES, AND (IF APPLICABLE) BAPTISMAL
CERTIFICATES AND/OR SPONSOR LETTERS.**

+ PLEASE KEEP A COPY OF EVERYTHING SUBMITTED +

Candidate for Confirmation Spring 2020

(Please print clearly)

Candidate's Name: _____

Address: _____

Tel. #: _____ Cell #: _____

E-Mail: _____ Parishioner #: _____

PART I – CONFIRMATION NAME

A Saint's name must be used.

You may use one of your baptismal names.

Search here if you are unsure if the name you have selected is a saint's name.

<http://www.catholic.org/saints/stindex.php>

Confirmation Name: _____

(One name only)

<i>For office use only</i>	
I. Name _____	II. Page/Cert _____
III. Sign/Letter _____	Approved _____

PART II – BAPTISM INFORMATION

Church and City of Baptism*:

Date of Baptism: _____ - _____ - _____
(m/d/y)

DOB: _____ - _____ - _____
(m/d/y)

Age at Confirmation _____

Father's Name: _____

Mother's Maiden Name: _____

IF YOU WERE baptized at St. Rose - you do not have to provide certificate

***IF YOU WERE NOT baptized at St. Rose –**

Please attach a copy of your child's baptismal certificate. If you do not have one, please call the church where your child was baptized and ask them to send you a copy.

(Following the Sacrament of Confirmation, that parish will be notified by mail of the Confirmation date for their permanent records, which are held in parish of Baptism, per Canon Law.

PART III - SPONSOR INFORMATION

We will have a Covenant Mass in the winter, during which both the sponsors and candidates approach the altar and the candidate will sign the book signifying their intention to receive the Sacrament of Confirmation and the sponsor will sign the book signifying their intention to serve as sponsor. **If your sponsor has not been approved, they will not be able to sign the Book of Covenant.**

Sponsor's Name **: _____

Address: _____

Telephone #: Home: _____ Cell: _____

Parish: _____

If St. Rose Parishioner, please provide Parishioner # _____

****IF SPONSOR IS A PARISHIONER OF ST. ROSE:**

St. Rose Parishioners **must either see Fr. Matthew after Mass or call the office** and make an appointment to have him **sign this form.** **Please plan ahead** – if choosing someone who might be in college in the fall – have Father Matthew sign before they return to college. He will sign after any Mass.

SPONSOR OK: _____ DATE: _____

Fr. Matthew Kranc

PLEASE DO NOT RETURN THE FORM UNSIGNED.

****IF SPONSOR IS A PARISHIONER OF ANOTHER PARISH:**

Please have your **sponsor call their parish office** for a form letter stating that they are a practicing Catholic and are eligible to serve as a sponsor. **Please stress to your sponsor the importance of doing this as soon as possible.**

SACRAMENTAL FORM AND ALL NECESSARY ATTACHMENTS
MUST BE SUBMITTED BY:

Fall Orientation Meeting – September 10, 2019

**An alternative sponsor will be assigned if all certificates/
signatures are not received on time.**

Please direct any questions to: **tdsouza@saintroseoflimachurch.org**