

OUR LADY OF GUADALUPE CONFIRMATION REGISTRATION FORM FOR ADULTS

Please print legibly

CANDIDATE'S NAME _____
First Middle (no initials) Last

ADDRESS _____
Street City Zip Code

PRIMARY PHONE # _____

PRIMARY EMAIL(S) _____

DATE OF BIRTH _____ CITY _____ STATE _____

PARENT/GUARDIAN NAME _____
First Middle (No initials) Last

PARENT/GUARDIAN NAME _____
First Middle (No initials) Last

SPONSOR'S NAME _____

PHONE # _____ EMAIL _____

NOTES:

A copy of the candidate's baptism certificate will be required (even if baptized at OLG)

Office Use Only

Interview _____ Fee _____ Certificate _____ PDS _____