



ADULT CONFIRMATION REGISTRATION

St. Catherine of Siena Adult Confirmation Sessions

Last Name	First Name	Middle Name	Date of Birth	Age	Gender
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Address	City/State/Zip	Home Phone
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Cell Phone	Email Address
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Church Parish in Which You Are Registered.

If not registered in St. Catherine of Siena Parish, please attach written permission from your pastor.

Date of Baptism	Church of Baptism	City/State
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**Please attach a copy of your Baptismal Certificate,
and return to Paula Atchley at the Parish Office**