



## Confirmation Yr. 1 Registration 8th Grade

**This form is to be completed & returned to the Religious Education Office. A copy of baptism MUST be attached. Please write clearly.**

Today's date \_\_\_\_\_ Home Phone \_\_\_\_\_

Name in which family is registered at St. Helen? \_\_\_\_\_

Candidate's Full Name: \_\_\_\_\_ Gender: F M \_\_\_\_\_

Mailing address: \_\_\_\_\_ Zip \_\_\_\_\_

**Email:** \_\_\_\_\_

Candidate's Cell: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_

Father's Religion: \_\_\_\_\_ Phone \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Maiden \_\_\_\_\_

Mother's Religion: \_\_\_\_\_ Phone \_\_\_\_\_

School presently attending: \_\_\_\_\_ grade \_\_\_\_\_

Candidate Date of Birth \_\_\_\_\_ Date of Baptism: \_\_\_\_\_

Church of Baptism \_\_\_\_\_ address \_\_\_\_\_

Godfather Name \_\_\_\_\_ Godmother Name \_\_\_\_\_

Received First Eucharist? \_\_\_\_\_ First Reconciliation? \_\_\_\_\_

*2020 CONFIRMATION FORMATION*

# SERVICE OPPORTUNITIES

**"AS EACH ONE HAS RECEIVED A GIFT, USE IT TO SERVE ONE ANOTHER AS GOOD STEWARDS OF GOD'S VARIED GRACE"  
1 PETER 4:10**

**OCTOBER 24TH  
NOVEMBER 14TH  
DECEMBER 12TH**

**PLUS ADDITIONAL KIWANIS YOUTH IN ACTION DAYS**

ALL YOUTH ARE REQUIRED TO PARTICIPATE IN AT LEAST TWO (2) SERVICE PROJECTS AS PART OF THEIR FORMATION FOR THE SACRAMENT OF CONFIRMATION. PERMISSION FORMS AND FURTHER DETAILS WILL BE PROVIDED CLOSER TO THE PROJECT DATES

