



## 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? \_\_\_\_\_