CONFIRMATION REGISTRATION

Saint Dominic Parish, Oakville

PERSONAL INFORMATION

Please print Full name of Candidate:				
Postal Code:				
Father (first name & family name):			Religion:	
Mother (first name & maiden name):			Religion:	
Email:				
School:		Tea	acher:	
	BAPTIS	MAL INFOR	MATION	
Church of Baptism:				
Address:				
Street		City	Province Postal Code	
Date of Baptism:	Day	Month	Year	
Please provide a copy of the			<u>Sertificate</u> to be submitted with this form	
Name of Sponsor (if known):		SOR INFORM		
Tvame of Sponsor (ii kilowii).				
In selecting a sponsor for Confirm	nation, the	following shou	uld be kept in mind:	
-		-	med, and practicing Catholics sold and may not be a parent	
I commit to attending prepare	ation sessi	ions at the Par	rish and to completing a Service Proje	
Candidate`s Signat	ure			