



**ST REGIS MISSION SACRAMENT OF
CONFIRMATION
REGISTRATION 2018-2019
FOR ADULTS**



**ST REGIS MISSION CHURCH
SACRAMENT OF CONFIRMATION REGISTRATION
FOR ADULTS 2018-2019**

PLEASE PRINT CLEARLY

FULL NAME	LAST	FIRST	MIDDLE	
DATE OF BIRTH	MONTH	DAY	YEAR	
DATE BAPTIZED	MONTH	DAY	YEAR	WHERE?
DATE RECEIVED FIRST COMMUNION	MONTH	DAY	YEAR	WHERE?

IMPORTANT: if BAPTIZED or received First Communion at another Church, please provide copy of Certificates. Niawen:kowa

HOME ADDRESS:	
EMAIL ADDRESS	
HOME PHONE	
CELL PHONE	
WORK PHONE	

MOTHER'S NAME: _____
LAST
FIRST
MIDDLE

MOTHER'S MAIDEN NAME _____
LAST
FIRST
MIDDLE

FATHER'S NAME: _____
LAST
FIRST
MIDDLE

WAIVER: From time to time, photos are taken of the class for publication, education promotional purposes and media coverage. Please sign below giving permission of such to the St. Regis Mission Church and the Religious Education Program. Please do not sign if you do not give permission. Niawen:kowa

Signature: _____ **Print name:** _____

You will be required to select a sponsor and a Saint's name. One of the main components of preparation for the Sacrament of Confirmation is that you must attend Mass regularly. By signing this registration form, you acknowledge that if all work is not done in a timely fashion, you may not be eligible to receive the Sacrament of confirmation.

Signature **Date**