

Confirmation Registry St. Teresa of Avila Catholic Church



Confirmation 1 _____

Confirmation 2 _____

Child's Full Name _____
Last First Middle

Birth Date ____/____/____ City _____ State _____

Are you currently a registered member of St. Teresa of Avila Parish? _____

Valid Email for Correspondence _____

Baptism: Date ____/____/____ Church _____

Street Address City State Zip Code

Father's Full Name

Mother's Full Maiden Name

Sponsor's Name

Sponsor's Email

- My child has received the Sacrament of Reconciliation
Church _____ Year _____
- My child has received the Sacrament of First Holy Communion
Church _____ Year _____

A copy of your child's **Baptism** and **First Communion Certificates** must be provided to our offices for verification.

Signature of Parent/Guardian

Date