**St. Patrick's & Holy Cross Parishes**
**Preparation for Confession/Confirmation/Communion**

**(PLEASE PRINT ALL RESPONSES)**

## Candidate/Child Information:

1. Last/Family Name: _____
   First Name: _____
2. Date of Birth: _____
3. Place of Birth: _____ _____ _____
   (CITY) (PROVINCE) (COUNTRY)
4. My child has already received: (indicate with ✓ for each sacrament already received)
   *Baptism* Yes ☐ No ☐ *Confession* Yes ☐ No ☐
   *Confirmation* Yes ☐ No ☐ *First Communion* Yes ☐ No ☐
5. Grade Level: _____ Name of School: _____
6. Religious Education (Number of months/years in ongoing catechesis):
   _____

## Baptismal Information:

1. Date of Baptism: _____
2. Name of Church: _____
3. Church Address: _____
4. City, Prov., Country: _____
5. Postal/Zip Code: _____

I am registered with _____ (name of parish) for _____ years.

Which Community Mass would you regularly attend? HC at _____ St. Pat's at _____

## Parents:

1. Father's first & last name: _____
2. Mother's first & last name (maiden) before marriage: _____

## Contact Information:

1. Street Address: _____
2. City/Postal Code: _____
3. Phone: Home: _____ Cell: _____
4. E-Mail Address: _____

**Allergy /Medical Concerns:** _____

FOR OFFICE USE ONLY:

| YEAR I | YEAR II | Baptism Cert. | SPONSOR'S NAME |
|---|---|---|---|
| ☐ | ☐ | ☐ | _____ |