REGISTRATION FORM FOR
RITE OF CHRISTIAN INITIATION OF CHILDREN/YOUTH

NAME: _____ _____
(first middle last) Confirmation Name

ADDRESS: _____

_____

PHONE: _____

EMAIL: _____

DATE OF BIRTH: _____

PLACE OF BIRTH: _____

FATHER'S NAME: _____

MOTHER'S NAME (with Maiden name) _____

SPONSOR'S NAME: _____

CHURCH NAME AND ADDRESS WHERE SPONSOR ATTENDS:

_____

_____

_____ _____
Signature of Parent Signature of Youth