

Candidate Formal Record Form

Please **PRINT** clearly – All requested information is required.

CANDIDATE NAME _____

Date of Birth _____

Home address (*no. & street, city, zip*) _____

Home phone or best contact phone #: _____

School attending _____

Grade entering in Fall 2018 _____

Home parish _____

Father's name (first & last) _____

Mother's name (first & maiden) _____

RECORD OF BAPTISM - *Please provide a copy of Baptismal Certificate. (REQUIRED)*

Date of Baptism _____

Church of Baptism _____

If not Nativity, provide church address (*no. & street, city, zip*) _____

Godparent Names _____ & _____

Confirmation Name _____

SPONSOR Name _____

Sponsor phone _____

Address _____

Sponsor's parish _____

DO NOT COMPLETE – OFFICE USE ONLY!!

Date of Confirmation _____

Celebrant _____

Check One: High School RCIC RCIA