Saint John the Baptist RC Church
Department of Faith Formation
1488 North Country Road
Wading River, New York 11792

CONFIRMATION ROBE and RECORD FORM

Please type or print all information legibly and completely in the form below. Form is to be completed by an adult (not the candidate) and returned to the Department of Faith Formation on or before the required due date (see Dates to Remember).

Candidate's Name:	First	Last	Date of Birth:	Month / Day / Year
Candidate's Address:	House No. (Apartment No.), Street Name		City	Zip
Birth Father's Name:	Father's First Name	Father's Middle Name		Date of Birth (MM/DD/Year)
Birth Mother's Name:	Mother's First Name	Mother's Middle Name	Maiden Name	Date of Birth (MM/DD/Year)
Candidate's Church *(of Baptism)*:				
Church Address:	Building No. and Street Name		Church City	Church Zip
CONFIRMATION NAME*:				
*Using one's Baptismal Name is acceptable as a Confirmation name. If a Confirmation name is taken, the name is to be a Saint's name – not a last name or nickname. Also, only one Saint's name is to be chosen – not a combination of names.				
Sponsor's Name:	Sponsor's First Name	Sponsor's Last Name		
Sponsor's Registered Church:	Sponsor's Church Name		Church City	Church Zip
Confirmation Robe Information				
Candidate's Height	Feet	Inches	White	Color

For Office Use Only
Date Form Received: _____ Received by: _____ ☐ Order Placed