



Office of Education, Evangelization and Catechesis  
467 Bloomfield Avenue, Bloomfield, Connecticut 06002  
Phone: 860.242.5573, Fax: 860.243.9690

## ADULT CONFIRMATION –FALL 2017

COMPLETED FORM DUE BY **NOVEMBER 1, 2017**

### Contact Information

Last Name: \_\_\_\_\_ First Name \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### Sacramental Information

Father's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mother's First Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Church of Baptism: \_\_\_\_\_ Date: \_\_\_\_\_

Street: \_\_\_\_\_ Town: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Church of First Holy Communion: \_\_\_\_\_ Date: \_\_\_\_\_

Street: \_\_\_\_\_ Town: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

*Please attach copies of records of Baptism and First Holy Communion to this form.*

Are you married? Yes \_\_\_\_\_ No \_\_\_\_\_ Maiden Name: \_\_\_\_\_

If you are married, were you married in the Catholic Church? Yes \_\_\_\_\_ No \_\_\_\_\_

*Please note that all matters of marriage must be resolved before receiving the sacrament of Confirmation. Please attach any relevant paperwork.*

**PLEASE DO NOT SUBSTITUTE THIS INFORMATION SHEET WITH ANOTHER**

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### Other Information

Confirmation Name (*must be that of a saint*): \_\_\_\_\_

Sponsor's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Sponsor's Relation to Candidate: \_\_\_\_\_

*Please attach signed Archdiocesan sponsor form to this form.*

*Where is Your Adult Confirmation Class Taking Place?*

Parish: \_\_\_\_\_ Town: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Catechist: \_\_\_\_\_ Title: \_\_\_\_\_

*Is This The Parish Where You Regularly Worship/Are Registered?* Yes \_\_\_\_\_ No \_\_\_\_\_

If No: Parish: \_\_\_\_\_ Town: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Catechist Endorsement

Catechist's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By signing this form, I testify that the applicant has completed their catechesis, has resolved all sacramental obstacles, and is prepared to receive the sacrament of Confirmation.

### Pastor Endorsement

Pastor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By signing this form, I testify to the completeness and accuracy of the above information.

*It is the responsibility of the parish/catechist to collect all sacramental records, verify questions of sacraments and marriage, and provide copies as requested by the OEEC.*

*This Sacrament of Confirmation will be recorded at the parish of Saint Timothy in West Hartford, CT.*

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