2017-2018 St. Louis Confirmation Registration

| Candidate Information: | | | |
|--|------------|-----------------|--|
| Candidate's Full Name: | | | |
| Street Address: | | Age: | |
| City: | _Zip code: | Birthdate: | |
| Father's Name: | | | |
| Mother's Name (including maiden name): | | | |
| Father's Cell Phone # | Mother's | s Cell Phone #: | |
| Home Phone #: | | | |
| Father's Email: | | | |
| Mother's Email: | | | |
| School: | | Grade: | |
| Allergies/Special Needs: | | | |
| Registered Parish: | | | |
| Sacrament Information: | | | |
| Baptism Church: | | | |
| Baptism date, city, state: | | | |
| First Penance Church: | | | |
| First Penance date, city, state: | | | |
| First Communion Church: | | | |
| First Communion date, city, state: | | | |

Submit a copy of all sacramental certificates (i.e., Baptism, First Reconciliation, and First Eucharist), by February 1, 2018, to DRE, if sacrament was received at a church other than St. Louis

Submit completed form by February 1, 2018 to the DRE, Ashlee Campbell, via:

Mail: 35 Edward Street, Buffalo, NY 14202-1505

Fax: 716.853.9225

Email: stlouisfaithformation@gmail.com