

ST. JUDE CATHOLIC CHURCH
19704 Johnson Road, South Bend, Indiana 46614-5441
574-291-0570 / Fax: 574-299-3051

WORKSHEET FOR THE CONFIRMATION RECORD

BAPTISMAL & FAMILY NAME _____
First Middle Last

BIRTHDATE: _____
Month Date Year

CITY & STATE OF BIRTH: _____

FATHER'S NAME: _____
First Middle Last

MOTHER'S NAME: _____
First Middle Maiden

FAMILY ADDRESS: _____
Street Address City Zip

PLACE OF BAPTISM: _____
Church

Street

City

State

Zip

DATE OF BAPTISM: _____
Month Date Year

CONFIRMATION NAME: _____

AGE OF CANDIDATE: _____

SPONSOR: _____
First Middle Last