

homeroom teacher.

## Sacrament of Confirmation in 2023-24 Initial Registration Form To be completed by Roman Catholic Students ONLY

Dear Reverend Father: I am a baptized Roman Catholic and wish to be Confirmed this year in St. Agnes Parish. To prepare for Confirmation, I promise to try to attend Sunday Mass in my Parish Church regularly and to deepen my faith in Christ.

(Signature of Applicant)

Last Name	First Name	Middle Name
Address		Postal Code
E-Mail Addresses	Cells	
Home Phone	My Scho	ool
Home Room Teacher's	Name:	
My Date of BirthBaptism Date		ism Date
•		
*Please attach a copy Church where you wis	of your Baptismal Certificate Ol h to be Confirmed. If you were r	NLY if you were NOT baptized in the never baptized, please call your Parish ism for a new copy of your certificate.
*Please attach a copy Church where you wis Pastor. If required, ple	of your Baptismal Certificate Of h to be Confirmed. If you were rease contact your Church of Bapt	NLY if you were NOT baptized in the never baptized, please call your Parish
*Please attach a copy Church where you wis Pastor. If required, ple	of your Baptismal Certificate Of h to be Confirmed. If you were rease contact your Church of Bapt	NLY if you were NOT baptized in the never baptized, please call your Parish
*Please attach a copy Church where you wis Pastor. If required, ple Father's Name	of your Baptismal Certificate Of h to be Confirmed. If you were rease contact your Church of Bapt	NLY if you were NOT baptized in the never baptized, please call your Parish ism for a new copy of your certificate.
*Please attach a copy Church where you wis Pastor. If required, ple Father's Name  Mother's Name	of your Baptismal Certificate Of h to be Confirmed. If you were rease contact your Church of Bapt  First Name  First Name	NLY if you were NOT baptized in the never baptized, please call your Parish ism for a new copy of your certificate.  Last Name

For more information, contact the Parish office at 475-7489 or st.agnes@shaw.ca