

## First Sacraments Registration

Child's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Are you Catholic? Yes No      Confirmed? Yes No      If yes,  
when? \_\_\_\_\_(month/year)

If no, are you interested in being confirmed? \_\_\_\_\_

Father's Name \_\_\_\_\_

Are you Catholic? Yes No      Confirmed? Yes No      If yes,  
when? \_\_\_\_\_(month/year)

If no, are you interested in being confirmed? \_\_\_\_\_