

ST MARY OF THE ANGELS
 1850 N. HERMITAGE AVE. CHICAGO, IL 60622 PH. 773-278-2644
CONFIRMATION REGISTRATION FORM

Please turn in this form with your payment to the Parish Office no later than: **September 5**

(Please print clearly)

General Information

Name _____
First Name Middle Name Last Name

Marital Status: Single _____ Married: _____ Widowed: _____ Divorced: _____ Separated: _____ Cohabiting: _____

Married: No _____ Yes _____ : Civilly _____ In the Catholic Church _____ Other _____
Maiden Name (If applicable)

Email _____

Street Address _____

City / State / Zip Code _____

Cell Phone _____ Home Phone _____

Date of Birth _____ Age: _____ Place of Birth (City & State) _____ Grade _____

Father's Name _____

Mother's Name _____ Mother's Maiden Name _____

Baptismal and First Communion Information **(Copy of the Certificate of Baptism and First Communion are required)**

Date of Baptism _____ Church of Baptism _____

Address of the Church of Baptism _____
(Street/Ave.)

(City)

(State/Country)

Date of First Communion _____ Church of First Communion _____

Confirmation Information

Confirmation Name (Saint's Name) _____

Name of the Sponsor _____

(Sponsor's completed Testimonial Form and Confirmation Certificate are required)

Date of Confirmation: Thursday, November 9, 2023 at 7:00 pm

Minister of Confirmation: Bishop Robert Joseph Lombardo C.F.R.

*****For ordering the gown: Candidate's Weight _____ Height _____**

To be filled out by the Parish Office

Confirmand's Baptismal Certificate _____ Sponsor's Testimonial Form

Confirmand's First Comm. Certificate _____ Sponsor's Confirmation Certificate _____ **Fee \$150 _____**

If you have any questions, please contact Mrs. Jaime at the Parish Office **773-278-2644 ext. 234**