

Church of the Good Shepherd Confirmation Registration Form

****A copy of your child's Baptismal Certificate is required for Confirmation.**

Confirmand's Full Name: _____ Age: _____

Date of Birth: _____ City and State of Baptism: _____

Current Address: _____

Father's Full Name: _____

Mother's Full Name: _____

Contact Phone Number: _____

****Same as it appears on the child's Baptismal Certificate.**

Child's Baptismal Godparents Full Names: _____

Child's Confirmation Sponsors Full Name: _____