



CONFIRMATION REGISTRATION FORM 2026-2027

All Information in this Box is about the CANDIDATE:

Candidate's Full Name: _____

Name Candidate Goes By / Nickname: _____

Address: _____

City: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Date of Birth: ____/____/____ Current Age: _____

Name of School: _____ Year in School: _____

Date of Baptism: ____/____/____

Name and Address of Parish where Candidate was baptized:

(If the Candidate was NOT baptized at Christ the King, a copy of the Baptismal Certificate from that parish MUST be provided.)

****CONFIRMATION IS A COMMITMENT****

**Candidates agree to attend weekly mass and
ALL meetings, retreats, sessions and service projects.**

Candidate's Signature: _____ Date: _____

Mother's Name: _____ Maiden Name: _____

Mother's Home Phone: _____ Mother's Cell Phone: _____

Mother's E-mail Address: _____

Father's Name: _____

Father's Home Phone: _____ Father's Cell Phone: _____

Father's E-mail address: _____

**** Please Note:** Your Confirmation Registration Form and \$75.00 Fee are due at the Parent/Candidate Session. Please make checks payable to: Christ the King.

FOR OFFICE USE ONLY:

Baptism Cert on File: _____ Payment Rec'd: _____ Type: _____ PDS Entry: _____

Confirmation Name: _____ Confirmation Date: ____/____/____

Sponsor: _____ Sponsor Parish: _____

Parish of Baptism Notification: _____ Sacramental Registry Entry: _____ By: _____