

# OUR LADY OF FATIMA 2014-2015 CONFIRMATION Registration

Registration Fee: \$50.00

Registration Fee and Form due: **August 22, 2014** (There will be a \$25 late fee for all forms received after 8/22)

Return this form with payment to: Our Lady of Fatima Parish Office 2319 Johnston St. Lafayette, LA 70503

## **A Baptism Certificate MUST be turned in with this form**

**Please PRINT and fill out entire form, NO initials or nicknames**

Candidate's FULL Name:

\_\_\_\_\_ Gender: \_\_\_\_\_ M \_\_\_\_\_ F  
First Middle Last

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Month/Day/Year City State

Mailing Address: \_\_\_\_\_  
Street City State Zip

Home: \_\_\_\_\_ Cell: (M) \_\_\_\_\_ (F) \_\_\_\_\_

School Candidate Attends: \_\_\_\_\_ Grade entering in fall of 2014: \_\_\_\_\_

Baptism: Date \_\_\_\_\_ Church \_\_\_\_\_  
City, State

First Eucharist: Date \_\_\_\_\_ Church \_\_\_\_\_  
City, State

### Office Use Only:

Confirmation Name: \_\_\_\_\_ Sponsor: \_\_\_\_\_

### (FAMILY INFORMATION)

Parent's Email: \_\_\_\_\_

Father's FULL Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(If different from above) Street City Zip

Mother's FULL Name: (include maiden name) \_\_\_\_\_  
Religion: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(If different from above) Street City Zip

**\*\*According to Church Law, reception of the sacraments of initiation should occur in the parish in which the child is registered. If you are currently not a registered parishioner of Our Lady of Fatima Roman Catholic Church, you will need to obtain a letter of permission from the Church in which you are currently registered or in which geographical boundaries you live.**

Registered Member of \_\_\_\_\_ Church Parish  
Church City, State

**\*I agree to attend the Safe Environment Education class with my child on Sunday, February 8, 2015 at 6:00pm (Required by all Non-Catholic School CCD students & parents of the Diocese of Lafayette)**

Parent's Signature \_\_\_\_\_