



**Religious Education Program**  
**Adult Confirmation**  
**Registration Form 2018**  
**Good Shepherd Catholic Church**

**CANDIDATE INFORMATION**

Legal Name of Candidate for Confirmation:

Last Name
First Name

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_

Email \_\_\_\_\_

*Please submit a copy of your **recently issued** Baptismal Certificate upon registration.*  
*Program Fee: \$55.00 (make check payable to Good Shepherd Church.)*

**Requirements:**

To participate in the Adult Confirmation Classes:

1. Candidate must be a baptized Catholic.
2. Candidate must register and submit it with a **RECENTLY ISSUED**\* copy of the Baptismal Certificate (issued between December 2017 and February 2018) and \$55.00 fee. And a copy of the Eucharist Certificate (if it is not noted in your Baptismal Certificate).
3. Candidate will need to choose a confirmation sponsor who is confirmed, practicing Catholic and at least 18 years of age.

Marital Status & History (please complete)

Single     Engaged     Married     Widowed     Separated     Divorced

*If married, did you have:*     Catholic Church Ceremony     Civil Ceremony  
 Non-Catholic Ceremony, What denomination? \_\_\_\_\_

Current Marriage:    Date \_\_\_\_\_    Place \_\_\_\_\_

**SACRAMENTAL HISTORY:**

Baptized?    Place \_\_\_\_\_    Date/Year \_\_\_\_\_

First Eucharist?    Place \_\_\_\_\_    Date/Year \_\_\_\_\_

First Reconciliation?    Place \_\_\_\_\_    Date \_\_\_\_\_

Do you attend Sunday Mass regularly?     yes     No

What parish do you attend? \_\_\_\_\_

TO SUBMIT COMPLETED FORM, YOU CAN DROP IT OFF IN THE PARISH OFFICE OR MAIL IT TO:

Good Shepherd Catholic Church  
 9539 Racquet Court  
 Elk Grove, CA 95758

<b>OFFICE USE ONLY</b> \$55.00 FEE _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check Baptismal Certificate _____ Sponsor Information _____
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\*Not a copy of the original Baptismal Certificate