

Confirmation Registration Form

St. John de la Salle Catholic Church
10205 S. M. L. King Drive
Chicago, IL 60628

PLEASE **PRINT** THE INFORMATION

Name _____
First Middle Last

Address _____ Phone# _____

City _____ State _____ Zip Code _____

Birth Date _____
Month / Day / Year

Place of Baptism _____
Name of Church

City & State _____ Date of Baptism _____
Month / Day / Year

Present Church You Attend _____

Mother's Maiden Name _____

Father's Name _____

Name of Sponsor _____

Confirmation Name (Optional) _____

DATE OF CONFIRMATION: