

**St. Rose of Lima Confirmation Program**  
312 Ridgedale Avenue  
East Hanover, NJ 07936  
973-887-5572/973-599-2944

**Sacramental Information Form**

Candidate for Confirmation Spring 2017

Candidate's Name: \_\_\_\_\_ Parishioner #: \_\_\_\_\_

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

Tel. #: \_\_\_\_\_ Cell #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**PART I – BAPTISM INFORMATION**

Church/City of Baptism: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ DOB \_\_\_\_\_ Age at Confirmation \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

**Please attach a copy of your child's baptismal certificate.** If you do not have one, please call the Church where your child was baptized and ask them to send you a copy. That parish will be advised of Confirmation date for permanent records which are held in parish of Baptism, per Canon Law.

*\*\*\*If your child was baptized at St. Rose you do not have to provide certificate\*\*\**

**PART II – CONFIRMATION NAME**

**A saint's name must be used.** You may use one of your baptismal names.

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

(One name only)

\*\*\*\*\*

**Please be sure form is complete and, if needed, baptismal certificate and sponsor letter is attached before submitting.**

<i>For office use only</i>	
I. Page/Cert _____	II. Name _____
III. Sign/Letter _____	Approved _____

**PART III SPONSOR INFORMATION**

We will be having a Covenant Mass in the fall during which both the sponsors and candidates approach the altar and the candidate will sign the book signifying their intention to receive the Sacrament of Confirmation and the sponsor will sign the book signifying their intention to serve as sponsor. If your sponsor has not been approved, they will not be able to sign the Book of Covenant.

Sponsor's Name: \_\_\_\_\_

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

Telephone #: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Parish: \_\_\_\_\_  
If St. Rose Parishioner please provide Parishioner # \_\_\_\_\_

**SPONSOR IS A PARISHIONER OF ST. ROSE**

St. Rose Parishioners must either see Fr. Owen after Mass or call the office and make an appointment to have him sign this form.

**PLEASE DO NOT RETURN THE FORM UNSIGNED.**

SPONSOR OK: \_\_\_\_\_ DATE: \_\_\_\_\_  
Fr. Owen B. Moran

**SPONSOR IS A PARISHIONER OF ANOTHER PARISH**

Please have your **sponsor see their parish priest** for a letter stating that the sponsor is a practicing Catholic and is eligible to serve as sponsor. Please stress to your sponsor the importance of doing this as soon as possible.

**SACRAMENTAL FORM AND ALL NECESSARY ATTACHMENTS**  
**MUST BE SUBMITTED BY AUGUST 1, 2016**

**An alternative sponsor will be assigned if all certificates/signatures are not received on time.**