**DATE SHEET/APPLICATION FORM FOR CONFIRMATION**

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| **PARISH/ CHAPEL/GKK:** | | | | **VICARIATE:** | | |
| **DATE OF CONFIRMATION: Year:\_\_\_\_\_\_\_\_\_ Month:\_\_\_\_\_\_\_\_\_\_\_\_ Day:\_\_\_\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_\_\_** | | | | | | |
| ***PARISH REQUIREMENTS*** | | | | | | |
| 1. Baptismal Certificate 2. Birth Certificate 3. Parent’s Marriege Contract  4. Seminar on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date Time** | | | | | | |
| **NAME OF CHILD:** First, Middle, Last | | | | | | **SEX:** Male Female |
| **DATE OF BIRTH:** | | | | | | **AGE:** |
| **PARISH WHERE CHILD WAS BAPTIZED:** | | **CITY/PROVINCE WHERE CHILD WAS BORN** | | | | |
| **PARISH WHERE CHILD WAS BAPTIZED:** | | **ADDRESS OF CHURCH WHERE CHILD WAS BAPTIZED:** | | | | |
| **DATE OF BAPTISM:** | |
| **PARENTS’ MARITAL STATUS/LEGITIMAC (PLEASE CHECK):**  Catholic church Protestant church Aglipaya church Others  Civil Not married | | | | | | |
| **NAME OF FATHER:** First, Middle, Last | | **NAME OF MOTHER:** (Maiden Name) First, Middle, Last | | | | |
| FATHER’S BIRTHPLACE: | | MOTHER’S BIRTHPLACE: | | | | |
| FATHER’S RELIGION: | | MOTHER’S RELIGION: | | | | |
| **ADDRESS:** | | | | | | |
| **CONTACT NUMBER:** | | | | | | |
| **Name of Principal Sponsor:** (First, MI, Last) (GodFather) | | **Name of Principal Sponsor:** (First, MI, Last) (GodMother) | | | | |
| Religion: | | Religion: | | | | |
| Place of Birth | | Place of Birth | | | | |
| Address: | | Address: | | | | |
| **NAME OF MINISTER:** | | | | | | |
| **OTHER SPONSORS** | | | | | | |
| **NAME OF SPONSORS**  (First name, MI, Last name | **ADDRESS** | | | | **RELIGION** | |
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| Name of person who provided above information: SIGNATURE: | | | | | | |
| Prepared by:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parish Secretary | Noted by  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Catechist | | | | Approved by:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parish Priest | |
| Recorded by: | Date: | | Book No. Page No. Line No. | | | |

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| **SPONSORS**  (Please Write the Complete Name of your Sponsors) | | |
| **Name:** | | **Name:** |
| Religion: | | Religion: |
| Residence: | | Residence: |
| **Name:** | | **Name:** |
| Religion: | | Religion: |
| Residence: | | Residence: |
| **Name:** | **Name:** | |
| Religion: | Religion: | |
| Residence: | Residence: | |
| **Name:** | **Name:** | |
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| **Name:** | **Name:** | |
| Religion: | Religion: | |
| Residence: | Residence: | |