

**CONFIRMATION INFORMATION SHEET**

*St. Martin of Tours Parish – Cecil, WI*

**FULL NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

**CHURCH OF BAPTISM:** \_\_\_\_\_

**CHURCH OF FIRST CONFESSION & FIRST COMMUNION (IF  
DIFFERENT THAN BAPTISMAL CHURCH):**

\_\_\_\_\_

**IF BAPTIZED IN NON-CATHOLIC CHURCH, GIVE DATE OF RECEPTION  
INTO FULL COMMUNION WITH CATHOLIC CHURCH AND LIST NAME  
OF THE CATHOLIC CHURCH:**

\_\_\_\_\_

**CONFIRMATION SPONSOR (WHO MUST BE A CONFIRMED,  
PRACTICING CATHOLIC, and a MEMBER OF A CATHOLIC PARISH):**

\_\_\_\_\_

**SPONSOR'S PARISH:** \_\_\_\_\_

**YOUR CONFIRMATION NAME:** \_\_\_\_\_

\_\_\_\_\_ **PROOF OF BAPTISM**

\_\_\_\_\_ **CONFIRMATION RETREAT**

\_\_\_\_\_ **INTERVIEW WITH DEACON**

\_\_\_\_\_ **LETTER TO BISHOP**

*[Due one month before Confirmation]*

\_\_\_\_\_ **SERVICE ACTIVITY LOG**

\_\_\_\_\_ **BISHOP'S STUDY GUIDE**