

*The Catholic Parish of
St. John the Baptist*

Confirmation Enrollment Form
Class to be confirmed in 2010

BAPTISMAL NAME:

First

Middle

Last

SAINT NAME: _____

SPONSOR NAME: _____

FATHER'S NAME:

First

Middle

Last

MOTHER'S NAME:

First

Middle

Maiden

Address:

Major Cross Streets: _____

City, Zip:

Phone Number: _____

Student E-Mail:

BAPTISM INFORMATION:

Date of Baptism: _____

Church of Baptism: _____

City, State of Church: _____

FIRST EUCHARIST INFORMATION:

Date of Eucharist: _____

Church of Eucharist: _____

City, State of Church: _____

**Please submit a copy of the Baptism
Certificate to the RE Office.**



**Total Youth
Ministry**

**St. John The Baptist • Religious Education • 924 South Littler • Edmond, OK 73034 • (405) 340-9281
P.O. Box 510 • Edmond, OK 73083**