



Confirmation Registration

BLESSED SACRAMENT CATHOLIC CHURCH
CONFIRMATION PROGRAM 2019/2020

Teen's Full Name at Baptism: _____

Date of Birth: _____ Baptismal Date: _____

Address: _____

Parent's Names: _____

Home Phone: _____ Cell Phone: _____

Parent Email Address: _____

Candidate's Email Address: _____

Saint's Name: _____ Sponsor's Name: _____

High School Attending: _____

On the back of this page, please write a short essay with the saint's biography and why you chose your saint's name.

Please return to Blessed Sacrament Parish Office by August 1st.

624 MICCOSUKEE RD. TALLAHASSEE, FL 32308 (850) 222-1321