



CHURCH OF THE IMMACULATE CONCEPTION AND ST. PAUL OF THE CROSS

Catholic Parish of Dulwich Hill, Archdiocese of Sydney, Established in 1907

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SACRAMENT OF CONFIRMATION ENROLMENT FORM 2019

Name:		Date of Birth:
Current address:		
City:	State:	Post code:
School attended:		Year/class:
Confirmation saint:		
SACRAMENT RECORD		
Clearly PRINT the name of the <u>church, city and the date</u> the sacrament was conferred. A copy of the certificate will be required upon registration. *In case of a missing document, please contact the parish church where the sacrament took place for a sacrament notification copy prior to registration.		
BAPTISM:	DATE:	
RECONCILIATION:	DATE:	
FIRST HOLY COMMUNION:	DATE:	
CONFIRMATION: ST PAUL OF THE CROSS, DULWICH HILL	DATE: tba June	
PARENTS INFORMATION		
Father's full name:		Phone no.:
Mother's name:		Phone no.:
Mother's maiden name:		
Email address preferred for correspondence:		
PARENTAL PERMISSIONS		
I authorise the information provided on this form to be used and recorded for the purpose of sacramental preparation which includes parish registers and certificate. I have included payment for this preparation as set by parish administration \$50		
SPONSOR INFORMATION		
Full name:		
Parish of confirmation:		Date:
Parish attending:		Phone no.:
**The sponsor should already be confirmed. Preferably the godparent at Baptism.		
Signature of the parent/applicant:		Date:

OFFICE USE ONLY

Certificate provided:	Payment received	By:
		Date:
Acts 1:8 "you will receive power when the Holy Spirit comes on you; and you will be my witnesses"		