

**SACRAMENT INFORMATION**  
**Confirmation Registration**  
**PLEASE RETURN TO ADDRESS BELOW**

Student's Name \_\_\_\_\_  
(Please PRINT in block letters EXACTLY as you would like it to appear on your confirmation certificate.)

Student's Current Address \_\_\_\_\_

***If baptized in a parish other than St. Joseph, St. Stephen, or  
St. Bartholomew, please attach a copy of the Baptismal  
certificate.***

INFORMATION FROM BAPTISMAL CERTIFICATE

Date of Birth \_\_\_\_\_ City of Birth \_\_\_\_\_

Date of Baptism \_\_\_\_\_  
(month) (day) (year)

Name of Church \_\_\_\_\_  
Of Baptism

Street Address \_\_\_\_\_  
Of Church of Baptism

City, State, Zip \_\_\_\_\_  
Of Church of Baptism

Father's Name \_\_\_\_\_  
On Baptismal Certificate

Mother's Name \_\_\_\_\_  
On Baptismal Certificate First (Maiden) Last

Verified by \_\_\_\_\_ (Staff person's initials)

**RETURN TO: ST. JOSEPH RELIGIOUS EDUCATION OFFICE**  
**1901 Lincoln Avenue**  
**Stevens Point, WI 54481**