

**CONFIRMATION REGISTRATION FORM
ST. MARY'S – ELLIS, KS**

COMPLETE NAME OF CANDIDATE (As you want it printed on the certificate)	GRADE	SCHOOL ATTENDING
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DATE OF BIRTH: _____
 Month Day Year Age

CITY and STATE BORN IN: _____

PARENTS: Father: _____
 First Name Middle Name Last Name

Mother: _____
 First Name Middle Name *Maiden Name*

ADDRESS: _____
 Street/Route/Box City State Zip

BAPTISMAL INFORMATION: _____
 Month Day Year

Name of Parish	City	State	Zip
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Priest Who Baptized Candidate:

Baptismal Sponsor's Names: _____

**If Candidate was not baptized at St. Mary's, Ellis, KS please attach a copy of their
baptismal certificate to this form.**