

Registration for Sacramental Preparation for Reconciliation, Eucharist or Confirmation Preparation ONLY This information is required for completing the parish's Sacramental Register. It must be completed in full. When submitting this form, please supply a copy of your child's baptismal certificate if they were NOT Baptized at St. Vincent's.

1) Sacrament **Baptismal Name of Candidate: First** **Middle** **Last** _____

Candidate's Birth Parent **Father's Name** **Mother's (Maiden) Name** _____

Birth: Month, Day, Year _____ **City & State:** _____

Baptism: Month, Day, Year **Church** **City & State** _____

2) Sacrament **Baptismal Name of Candidate: First** **Middle** **Last** _____

Candidate's Birth Parent **Father's Name** **Mother's (Maiden) Name** _____

Birth: Month, Day, Year _____ **City & State:** _____

Baptism: Month, Day, Year **Church** **City & State** _____
