ST. JOHN VIANNEY CHURCH

13 Baldwin Lane, Barrie, ON L4N 2W1 **Phone:** (705) 726-8007 Ext. 201 **Text:** (705) 479-1373

Email: wgordanier@archtoronto.org **Web Site:** https://stjohnvianneyba.archtoronto.org



2024-25 CONFIRMATION REGISTRATION FORM

<u>IMPORTANT!</u> THIS FORM WILL ONLY BE ACCEPTED WHEN ACCOMPANIED BY A COPY (<u>NOT</u> THE ORIGINAL) OF YOUR CHILD'S BAPTISMAL CERTIFICATE, even if you were baptized at St. John Vianney. (If there has been a name change or adoption since baptism please provide legal documentation.)

| Candidate's Name: | Last | First | Middle |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------------|------------------------|
| Date of Birth:(MM/DD/YY) | Place of Birth: | | |
| Home Address: | | | Postal Code |
| Father's First & Last Nam | ne: | | |
| Mother's First & Maiden I | Name: | | |
| Parental contact Email: _ | | | |
| Parental contact Cell#: | | (Will this growth | |
| Parental contact Cell#:(Will this number accept a text message? Yes / No) Church of Baptism:Date of Baptism: | | | |
| | nal Church: | | (MM/DD/YY) |
| Candidate's School: | | Teacher: | Grade: |
| Sponsor's First & Last Name: (Must be a baptized, confirmed, practising Roman Catholic, over age 16 and must attend Confirmation Mass. Not a parent.) | | | |
| Confirmation dates: | J J. A. | | |
| Please check <u>ONE</u> requested Saturday, Ju | | ::00 pm | |
| • | | • | |
| Sunday, Jun | e 8, 2025 🔲 2 | 2:00 pm | |
| Saturday, Ju | ne 14, 2025 🗆 2 | 2:00 pm | |
| As parent / legal guardian I give permission for the information gathered on this form to be used in the administration of the parish's sacramental programs, to post my child's name and date of sacraments on a parish bulletin board, to make records in the sacramental registers of this parish, and if my child attends a parish school, to inform the school of the date of the child's reception of the sacraments. | | | |
| Parent Signature | | Date | |
| Office Use ONLY: | Certificate □ \$75.0 | 0 Donation □ Excel Dat | e Received: |
| | | | Revised September 2024 |