

**Confirmation Registration
Catholic Parish of Whanganui
2024**



Child's full Name: _____
(Christian Names) (Surname)

Date of Birth: _____ Age: _____ Male / Female

Date of Baptism: _____

Place of Baptism: _____

Please attach a copy of the child's Baptism Certificate to this form

School: _____

Mother's Name: _____
(Christian Name) (Surname)

Father's Name: _____
(Christian Name) (Surname)

Address: _____

Mobile Number: _____

Email Address: _____

Notes:

For office use:

- Confirmation of child's Baptism
- Certificate
- Parish Roll updated

27 February 2024