

REGISTRATION FORM FOR CONFIRMATION

CONFIRMATION NAME: _____

BAPTISMAL NAMES: _____, IC NO: _____

DATE & PLACE OF BIRTH: _____, _____

FATHER'S NAME: _____ MOTHER'S NAME: _____

DATE & PLACE OF BAPTISM: _____, _____

HOME ADDRESS: _____

SPONSOR'S: _____

PLACE & DATE OF CONFIRMATION: _____, _____

MINISTER: _____