St Theresa’s and Sacred Heart

53 Front Street

Birstall, Leicestershire

LE4 4DQ

Tel: 0116 2929939

E-mail: theresa.sacredheart@gmail.com

www.theresa.sacredheart.co.uk

**APPLICATION FORM**

**For the**

**SACRAMENT OF CONFIRMATION**

**Candidate’s SURNAME** …………………………………………..……………..…………...............

**Candidate’s CHRISTIAN NAME(S)** ………….…………………………………..….……..............

**Candidate's Date & Place of Birth** …………………………………………………………...............

**Candidate’s Date and Place of Baptism** (full name and address please) ……………………............

…………………………………………..………………………………………………………............

(You will need to supply a copy of your Baptismal Certificate in the next few weeks)

**Candidate’s e-mail address** ……………..…………………………………………………….............

**Candidate’s Parents:**

**Father’s name** …………………………………………………………………….…..….....................

**Father’s Religion** …………………………………………………………………….………............

**Mother’s name** ………………………………………………………………………….......................

**Mother’s Religion** …………………………………………………………….……………….............

**Parental Home Address** ……………..…….……………………………………….…………........... ………………………………………………..……………………………………….………………...…………………………………………………..…….................... Post Code ………..……………

**Parental Home Telephone Number or e-mail address**.......................................................................

...............................................................................................................................................................