



St Benedict's Parish

Tallara Parkway

(PO Box 55)

Narrabundah ACT 2604

Phone: (02) 6295 7879

Email: narrabundah@cq.org.au

Website: www.cq.org.au/narrabundah

The Sacrament of Confirmation Enrolment Form

Child's Details (please print CLEARLY for the certificate purposes)

SURNAME: _____ FIRST NAMES: _____ MALE/FEMALE

CONFIRMATION NAME : _____

SPONSOR NAME : _____

DATE OF BIRTH : _____

DATE OF BAPTISM : _____ **Please send copy of the baptism certificate*

PLACE OF BAPTISM : _____

CURRENT PARISH & SCHOOL : _____

DATE OF BIRTH: _____ DATE OF BAPTISM: _____
CERTIFICATE ATTACHED: YES/NO

RECONCILIATION DATE _____

CERTIFICATE
ATTACHED: YES/NO

FIRST EUCHARIST DATE _____

CERTIFICATE
ATTACHED: YES/NO

MOTHER'S FIRST NAME: _____ SURNAME: _____ MAIDEN NAME:

CATHOLIC NON-CATHOLIC

HOME PHONE: _____ WORK PHONE: _____ MOBILE: _____

EMAIL: _____

(please print)

FATHER'S FIRST NAME: _____ SURNAME: _____

CATHOLIC NON-CATHOLIC

HOME PHONE: _____ WORK PHONE: _____ MOBILE: _____

EMAIL: _____

(please print)

Important Dates for your diary

Confirmation Preparation & Practice Dates:

Saturday 24 August - 3:30-7pm Parish Centre: followed by 6pm Vigil Mass

Confirmation Celebration:

Sunday 22 September - 9am: with Arch Prowse during 9am Mass followed by celebration in the Parish Centre

Check List:

- Signed and completed enrolment form
- Copy of the baptism/Reconciliation/First Eucharist certificates
- Donation \$35.00 (to cover the cost)

Payment Details:

Account name:	St Benedict's Parish
BSB:	062 786
Account Number:	0000 14992
Reference:	Conf – surname of your child.

Confirmation Seating Request

Please note that to be fair to all candidates one pew is usually allocated per family and we are unable to promise more seating than this. We ask for your understanding as we try to accommodate all the families' requests.

Child's name: _____

Number of people attending: _____

Signed: _____

(Parent / Guardian)
