

**OUR LADY OF MOUNT CARMEL PARISH
FAITH FORMATION EDUCATION
CONFIRMATION REGISTRATION FORM**

2025 – 2026

Sarah J Mack – Director of Faith Formation

sarahm@mtcarmel.com

PHONE: 969-6868 Office or 574-9941 Cell

***All Students must submit a copy of their Baptismal Certificate with this form. A student will not be registered for Confirmation without a copy of their Baptismal Certificate attached to the registration packet.**

Registration Fees: \$150 a year, covers fees for the program, bibles, material for class, Youth Days & retreats.

Student Name: (Print) _____

Home Address: _____

City: _____ ZIP: _____ Phone: _____

Email Address: _____

Date of Birth: ____ / ____ / ____

Grade in School _____ Name of School _____

Date of Baptism: ____ / ____ / ____ Church: _____

Address: _____

City: _____ State: ____ ZIP: _____

Penance Date: ____ / ____ / ____ Church: _____

Address: _____

City: _____ State: ____ ZIP: _____

First Communion Date: ____ / ____ / ____ Church: _____

Address: _____

City: _____ State: ____ ZIP: _____

Father's name: _____ Religion: _____

Work/Cell Phone: _____ E-mail: _____

Mother's maiden name _____

Mother's name: _____ Religion: _____

Work/Cell Phone: _____ E-mail: _____

Additional Information for Confirmation Students:

Students e-mail: _____ Student cell: _____

Sponsor: _____ Phone: _____

E-mail: _____

FOR OFFICE USE ONLY: ☐ Baptismal Certificate ☐ Input into Computer ☐ Fees Paid