



St. Benedict's
An Ordinariate Mission in Edmonton

REGISTRATION for CONFIRMATION

Please PRINT in capital letters

Full Name of Applicant: _____

Date of Birth: _____

City, Province & Country of Birth: _____

Date of Baptism: _____

(Copy of Baptism Certificate is required – please attach)

Name of Church/City of Baptism: _____

Name of Celebrant of Baptism: _____

Date of 1st Communion: _____

(Copy of 1st Communion Certificate is required – please attach)

Father's Full Name: _____

Mother's Full Maiden Name: _____

Home Address: _____

Home Telephone Number: _____

Date of Confirmation: _____

(To be completed by Parish Secretary)

Confirmation Name: _____

Sponsor Name: _____

Please return completed form(s) to:

Luke Gervais, Secretary

stb@ordinariate.ca

St. Benedict's

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a mission of St. John the Evangelist, Calgary Catholic Congregation, Inc.