

St. Mary of the Hills Religious Formation

2675 John R Rd.

Rochester Hills, Michigan 48307

**Confirmation Information Sheet**

**PLEASE PRINT**

**STUDENT INFORMATION:**

Student **LAST** Name: \_\_\_\_\_ **GRADE** \_\_\_\_\_

Student **FIRST** Name: \_\_\_\_\_ Family Name: \_\_\_\_\_  
(if different)

Confirmation Name: \_\_\_\_\_

Birthday: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Birthplace: \_\_\_\_\_

Baptized at: \_\_\_\_\_

**PARENT INFORMATION:**

Father: \_\_\_\_\_  
(First Name) (Last Name)

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Mother: \_\_\_\_\_  
(First Name) (Maiden Name) (Last Name)

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Parent E-mail: \_\_\_\_\_

**CONFIRMATION SPONSOR:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Sponsor's Parish of Attendance: \_\_\_\_\_

**Date Form Completed** \_\_\_\_\_

**Please return completed form to RE Office by December 1**