

## **ADULT CONFIRMATION**

Name\_\_\_\_\_

Address\_\_\_\_\_

Date of Baptism\_\_\_\_\_

Date of First Communion\_\_\_\_\_

### **Marital Status**

Please check one of the following:

Single\_\_\_\_\_

Married in the Catholic Church:\_\_\_\_\_

Married in a civil ceremony:\_\_\_\_\_

Widowed\_\_\_\_\_

Divorced\_\_\_\_\_

Divorced and remarried\_\_\_\_\_

Please obtain a copy of your Baptism from the Church in which you were Baptized. Submit it to the Parish Office at St. Michael's prior to June 3<sup>rd</sup>.

Parish Office 808-326-7771