



Saints Philip and James RC Church
Department of Religious Education
1 Carow Place, St. James, New York 11780
631-584-3204

CONFIRMATION RECORD FORM

Please PRINT all information legibly and completely in pen. Form is to be filled out by an adult not the child, and returned to the Religious Education Office no later than **JANUARY 10th 2026**

Candidate's Name: _____ Date of Birth: _____

Candidate's Residence: _____
Street address Town Zip

Birth Father's Name: _____

Birth Mother's Name: _____ Maiden Name: _____

Church of Baptism: _____ Date of Baptism: _____

Church Address: _____

CONFIRMATION NAME*: _____
(Confirmation name only)

*Using one's Baptismal name is acceptable as a Confirmation name. If a Confirmation name is taken, however, the name is to be a Saint's name – not a last name or nickname. Also, only one Saint's name is to be chosen – not a combination of names.

Sponsor's Name: _____ Sponsor's Parish: _____

CONFIRMATION GOWN ORDER INFORMATION: Height: _____ Feet: _____ Inches: _____