

*Sacred Heart Church  
Faith Formation Office  
720 Merrick Ave  
North Merrick, NY 11566  
516-379-1356*

**CONFIRMATION INFORMATION SHEET**

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Please fill in the information below and return it to your child's teacher by **January 29<sup>th</sup>**

**(PLEASE PRINT ALL INFORMATION)**

Student's First & Last Name \_\_\_\_\_

Student's Date & Church of Baptism (complete address, town & zip code)

\_\_\_\_\_  
\_\_\_\_\_

Student's *Confirmation* Name \_\_\_\_\_

Student's Father's First & Last Name \_\_\_\_\_

Student's Mother's First & Last Name \_\_\_\_\_

Student's Mother's maiden Name \_\_\_\_\_

Name of Sponsor \_\_\_\_\_

Sponsor's Relationship to Candidate for Confirmation  
(grandfather, uncle, sister, etc...) \_\_\_\_\_