

**St. John the Evangelist
Plaquemine, LA**

**Confirmation Preparation
2nd Year PSR**

Candidate full name: _____ Date of Birth: _____
(FIRST) (MIDDLE) (LAST)

Age at Confirmation: _____ Grade: _____ School Attending: _____

Candidate's Confirmation saint name: _____

Parents: _____
(FATHER) (FIRST) (MIDDLE) (LAST)

(MOTHER) (FIRST) (MIDDLE) (MAIDEN)

Address #1: _____

Address #2: _____
(If applicable)

Home Phone: _____ Parent Work Phone: _____

Parent Cell Phone: _____ Student Cell Phone: _____ Parent E-Mail: _____

Sponsor's full name: _____
(FIRST) (MIDDLE) (LAST)

Address: _____

Home Phone: _____ Cell Phone: _____

Please turn in the following items at Parent Orientation/Registration Meeting:

Registration form

\$50 fee (Please make checks to St. John the Evangelist)

Copy of the candidate's **Baptism Certificate**