



St. John the Evangelist Catholic Church

Parish Office
57805 Main Street
Plaquemine, Louisiana 70764-2531
(225) 687-2402
(225) 687-1587 Fax

Confirmation Preparation 2nd Year PSR or Catholic School

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/Student Orientation/Registration Meeting on **Wednesday, August 23, 2017, 6:30 p.m. at St. John Parish Hall.**

Registration form

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

Copy of the candidate's Baptism Certificate