



2021-2022 CONFIRMATION ROLL BOOK FORM

Saint Thomas Aquinas Religious Education

1719 Post Road, Fairfield, CT. 06824 Office: (203) 255-1984 FAX: (203) 256-9305 E-Mail: STHOAQCCD@AOL.COM

Please Print

Child's Baptismal Name: _____
(First) (Middle) (Last) Gender (M/F)

Date of Birth: _____ Place of Birth: _____
(Month/Day/Year) (City, State)

Home Address: _____ Home/Cell Phone: _____
(Street, City, State)

Child's Baptism took place at: _____ On: _____
(Name of church) Exact date of Baptism- Month/Day/Year

Address of Church where Baptism took place: _____
Complete address is needed- Street, City, State

Confirmation Candidate is *currently* a member of this parish: _____
in: _____ (Name of church)
(Address of church)

Father's Name: _____ Father's Email: _____
(First) (Middle) (Last)

Mother's Name: _____ Mother's Email: _____
(First) (MAIDEN) (Last)

Home Phone: _____ Cell: _____

Child's Confirmation (Saint) Name: _____ Child's Age: _____
(How old will the child be *on the day of* his or her Confirmation)?

*Sponsor's Name: _____
(First) (Last)

Sponsor's Address: _____
(Street) (City) (State)

Sponsor's Home or Cell Phone: _____

Note: All sponsors must complete the Sponsor's Certificate Form. Go to: stthomasfairfield.com to print out Sponsor's Certificate Form.