

# Confirmation of Catechized Adults – May 19, 2024

Diocese of Springfield in Illinois  
REGISTRATION FORM

- Please PRINT or TYPE the information. The form is fillable for your convenience.
- Adult Catholics from outside the diocese may register for Confirmation with permission from their bishop.
- If the *Confirmand* is not baptized Catholic, please check the “Not baptized Catholic” and “Making First Holy Communion” boxes below to indicate that the Rite of Reception into Full Communion is needed.

## Confirmand Information

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

## Baptism Information

*\*\*\* Please enclose a copy of Certificate of Baptism or Reception Into Full Communion \*\*\**

Catholic Parish of Baptism/Reception: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  Not baptized Catholic

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  Making First Holy Communion

## Confirmation Information

Confirmation Name: \_\_\_\_\_

*(If not taking the name of a Saint, Blessed or Venerable person in the Catholic tradition, your Baptismal name is entered here)*

Sponsor's Name: \_\_\_\_\_

\_\_\_\_ Number of people attending the Conferral of Confirmation at the Cathedral. This number should include the *Confirmand* and his or her sponsor. Do not duplicate if there is more than one *Confirmand* from the same family.

## Current Parish Information

Parish Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

## Witness

Bishop Paprocki,

I recommend to you the candidate named on this form who is validly baptized and now desires to finish their initiation into the Church. I am confident that this candidate is properly catechized and will continue to live out the mission of the Catholic Church. I can attest that the sponsor also meets canonical requirements.

Pastor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return by May 1, 2024, to:  
Director for Catechesis - 1615 West Washington - Springfield, IL 62702-4757