

*Sacred Heart Church Faith Formation Office  
720 Merrick Ave  
North Merrick, Ny 11566  
ctannehillshc@gmail.com*

**CONFIRMATION INFORMATION SHEET  
Due 1/28/2026 (please print all information)**

**Student Information**

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

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

Confirmation Name (***one name***): \_\_\_\_\_

**THIS IS THE NAME FROM YOUR SAINT REPORT**

Date of Birth: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

Church of Baptism: \_\_\_\_\_

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

**Parent Information**

Father's Full Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

**Sponsor Information**

Full Name: \_\_\_\_\_

Current Parish: \_\_\_\_\_

Parish Town & State: \_\_\_\_\_

Relationship to Confirmation Candidate: \_\_\_\_\_