



## SAINT LUKE THE EVANGELIST PARISH – BLACKBURN SOUTH

### CONFIRMATION INQUIRY

CHILD'S NAME \_\_\_\_\_

FAMILY NAME \_\_\_\_\_

CONFIRMATION NAME \_\_\_\_\_

NAME OF SPONSOR \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

MOTHER'S NAME AND MAIDEN NAME \_\_\_\_\_

CHILD'S GENDER

MALE

FEMALE

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_

Mobile: \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

PLACE OF BIRTH e.g. Melbourne \_\_\_\_\_

DATE OF BAPTISM \_\_\_\_\_

PLACE OF BAPTISM \_\_\_\_\_

FATHER'S RELIGION \_\_\_\_\_

MOTHER'S RELIGION \_\_\_\_\_

- ❖ Please print clearly and ensure correct spelling as this information will be used to prepare your child's Certificate
- ❖ It is customary to offer a donation for the celebration of Parish Sacraments. As a guide, we recommend \$100.
- ❖ The Parish will provide the Confirmation Certificate.

**PARISH OFFICE:** 46 Orchard Grove Blackburn South 3130. PO BOX 2140

Phone: 98772292

Email: [blackburnsouth@cam.org.au](mailto:blackburnsouth@cam.org.au)

#### OFFICE USE ONLY

DATE OF CONFIRMATION \_\_\_\_\_ TIME \_\_\_\_\_

CELEBRANT \_\_\_\_\_

DATE PREPARATION ATTENDED \_\_\_\_\_

DATE OF PARISH WORKSHOP T.B.A. \_\_\_\_\_

ATTENDED \_\_\_\_\_ CONFIRMATION PARISH WORKSHOP

COMPLETED AS SCHEDULED \_\_\_\_\_ *[Priest to sign]*

Entered into :  
Registry  
Online registry