



# SACRAMENT INFORMATION SHEET

## ESPIRITU SANTO ROMAN CATHOLIC CHURCH

(Check the appropriate boxes below – sacraments you are SEEKING)

**BAPTISM**

**PROFESSION OF FAITH AS CATHOLIC**  
(Baptismal Certificate or Letter or Affidavit attached)

**CONFIRMATION**

**FIRST COMMUNION**

E-mail address: \_\_\_\_\_

FULL NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

Cell: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ CURRENT AGE: \_\_\_\_\_

PLACE OF BIRTH: (CITY & STATE): \_\_\_\_\_

BAPTISMAL INFORMATION: (For those already baptized)

NAME OF CHURCH: \_\_\_\_\_

(DENOMINATION) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

(Please attach certificate, letter or affidavit with this information also)

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

MOTHER'S NAME: \_\_\_\_\_

MOTHER'S MAIDEN NAME: \_\_\_\_\_

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

CONFIRMATION SPONSOR'S FULL NAME: \_\_\_\_\_

Sponsor Note if not a parishioner of Espiritu Santo

Proxy will be standing in for Sponsor (Name) \_\_\_\_\_

CONFIRMATION (SAINT) FULL NAME: \_\_\_\_\_

OFFICE USE ONLY:

DATE OF SACRAMENTS: \_\_\_\_\_

PRESIDER NAME / SIGNATURE: \_\_\_\_\_