# St. Thomas Aquinas Catholic Church

813 Carey Ave.

Ruston, LA. 71270

Ph: 318-255-2870

# **Confirmation Information Form 2019**

#### **STUDENT INFORMATION**

(Please enter the student name as you want it to appear on the certificate)

Student Name:

Grade:

Date of birth:

#### **CHURCH INFORMATION**

(Please enter the name of the church where your child was baptized)

Church Name:

Address:

City:

State:

Name of priest or deacon who presided over the baptism

## PARENTS/SPONSOR INFORMATION

Mother's Full Name:

Father's Full Name:

Sponsor's Full Name:

## **BEST CONTACT INFORMATION**

Home Phone:

Cell Phone:

Email Address: