

Office of Lifelong Faith Formation  
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## Sacrament of Confirmation Adult Registration 2023-24

**To register for the program:**

Full name \_\_\_\_\_

Nickname \_\_\_\_\_ (if preferred) Birthdate \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip code \_\_\_\_\_

**Phone numbers:** Do you wish to receive texts on your cell phone \_\_\_ Yes \_\_\_ No

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

**Email:**

We communicate via email to save on mailing and paper costs. We need a working email addresses, which you check regularly. Please write legibly. Email \_\_\_\_\_

**Please attach a copy of your baptismal certificate.**

Church of Baptism \_\_\_\_\_ Date \_\_\_\_\_

Church of 1<sup>st</sup> Eucharist \_\_\_\_\_ Date \_\_\_\_\_

Church of 1<sup>st</sup> Reconciliation \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_ Parishioner \_\_\_ Non-Parishioner

Do you have any Dietary restrictions or food allergies? \_\_\_\_\_

**Formal Faith Formation:** (please check and circle all that apply)

\_\_\_ I attended Catholic school for K 1 2 3 4 5 6 7 8 9 10 \_\_\_\_\_

School(s)

\_\_\_ I attended Faith Formation for K 1 2 3 4 5 6 7 8 9 10 \_\_\_\_\_

Parish(es)

\_\_\_ I am actively involved in at St. Joseph University Parish

Why do you want to be a part of the Confirmation journey this year?

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What are your expectations and hopes for this process?

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