

# ST FERDINAND YOUTH MINISTRY

## CANDIDATE INFORMATION

LAST NAME:		FIRST NAME:		MIDDLE NAME:		DATE OF BIRTH:	
HOME ADDRESS				CITY:		ZIP CODE:	
HOME PHONE:		CELL PHONE:		HIGH SCHOOL:		CITY:	
						T-Shirt Size:	

## SACRAMENTS INFORMATION -- COPIES OF BOTH SACRAMENT RECORDS ARE REQUIRED

BAPTISMAL CHURCH:		FIRST HOLY COMMUNION CHURCH:	
BAPTISM DATE:	CITY/STATE/COUNTRY (If not US)	1st COMM DATE:	CITY/STATE/COUNTRY (If not US)

## PARENT/GUARDIAN INFORMATION

MOTHER LAST NAME:		FIRST NAME:		MAIDEN NAME:		PRIMARY LANGUAGE:	
MOM ADDRESS				CITY:		ZIP CODE:	
HOME PHONE:				CELL PHONE:			
FATHER LAST NAME:				FIRST NAME:		PRIMARY LANGUAGE:	
DAD ADDRESS				CITY:		ZIP CODE:	
HOME PHONE:				CELL PHONE:			

## FOR OFFICE USE ONLY

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

AMOUNT PAID \$ \_\_\_\_\_ CHECK ☐ CASH ☐

BAPTISMAL CERTIFICATE ☐  
1<sup>ST</sup> COMMUNION CERTIFICATE ☐