



**DIOCESE OF EAST ANGLIA  
OUR LADY OF LOURDES & ST. JOHN FISHER PARISH**

**CONFIRMATION FORM**

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

PROPOSED CONFIRMATION NAME: \_\_\_\_\_

DATE & PLACE OF BIRTH: \_\_\_\_\_

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

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

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

\_\_\_\_\_ POST CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

E-mail ADDRESS: \_\_\_\_\_

DATE & PLACE OF BAPTISM: \_\_\_\_\_

(Please supply a copy of the Baptism certificate with this form)

**By ticking this box  and signing below I agree to the Diocese of East Anglia using the information I have provided on this application solely for the purposes of processing this application and for any other sacramental matters which may arise in the future. I understand that this information will be held indefinitely by the Diocese of East Anglia in secure storage strictly in accordance with the provisions of the EU General Data Protection Regulations (GDPR) 2016/679, as to collection, handling, secure storage, use, retention and disposal of this data.**

**Signed by parents..... Dated .....**