

**ST. JOSEPH PARISH**  
**Confirmation 2026 Candidate Form**  
*Please return this form to the Christian Formation Office*

**Candidate's Name:** \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)

Date of Birth: \_\_\_\_\_ City & State of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Youth Cell Phone: \_\_\_\_\_ Youth Email: \_\_\_\_\_

**Sacrament Record**

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

Parish Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*\*If not baptized at St. Joseph Parish in Grafton, you will need to obtain a copy of your baptismal certificate by contacting the parish that administered the baptism. Please return a copy to the St. Joseph Christian Formation Office, 1619 Washington St., Grafton, WI 53024.*

Date of 1<sup>st</sup> Communion: \_\_\_\_\_ Parish: \_\_\_\_\_

Parish Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Received 1<sup>st</sup> Reconciliation (*circle one*): YES NO

**Parent/Guardian Contact Information**

1. \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST) (MAIDEN, if applicable)

Parent/Guardian Email: \_\_\_\_\_

Parent Phone(s): \_\_\_\_\_ Receive Confirmation emails: Yes ☐ No ☐

2. \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST) (MAIDEN, if applicable)

Parent/Guardian Email: \_\_\_\_\_

Parent Phone(s): \_\_\_\_\_ Receive Confirmation emails: Yes ☐ No ☐

**Confirmation Sponsor**

*Sponsor must be over the age of 16, have been confirmed in the Catholic Church, and a **practicing Catholic**.*

*Sponsor may NOT be a parent; however, if a sponsor cannot attend activities, a parent may act as a proxy.*

**\*\*Sponsors need to submit a completed Testimony of Designated Sponsor form, signed by their home parish\*\***

**Sponsor's Name:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Sponsor's Email: \_\_\_\_\_ Sponsor Phone Number: \_\_\_\_\_

Sponsor Address: Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Sponsor's Parish: \_\_\_\_\_ Located in: City: \_\_\_\_\_ State: \_\_\_\_\_

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I agree to commit myself to the best of my ability to fulfilling the requirements of the parish Confirmation program. I am aware that the fulfillment of these requirements is my responsibility, not that of my parents, though their support is necessary.

As a young person entering the process to accept the gift of faith for myself, preparation for the Sacrament of Confirmation, I will faithfully commit to the following:

- **Attendance and participation at Mass and Holy Days of Obligation;**
- **Attendance and participation at all formation sessions;**
- **Increased attention to prayer as I continue to grow in my personal relationship with Christ**
- **Follow the high moral standards of Jesus, developing Christian virtues;**
- **Work to understand the richness of the Catholic Faith Tradition and share it honestly with others;**
- **Communicate with Confirmation leaders and Youth Ministry staff.**

I will strive to grow as a person of prayer, study, service and sharing throughout the course of the year. Finally, I pray that God will bless and provide the grace for me to prioritize my faith commitment and grow in spiritual maturity, as well as all areas of my life, in this special year of preparation for Confirmation.

**CANDIDATE SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_/\_\_\_\_/\_\_\_\_

We pledge support and guidance to our son/daughter as he/she begins the process to confirm the faith we have nurtured since Baptism. We promise to encourage our child in the standards mentioned above, attend Mass and participate in sessions when necessary.

**PARENT/GUARDIAN SIGNATURE(S)** \_\_\_\_\_/\_\_\_\_\_