

Holy Family Cathedral
811 W. 6th Avenue
Anchorage, AK 99501



Sacramental Register:

Confirmation
1st Holy Communion

NAME: _____
Last First Middle

Date of Birth: _____ Place of Birth: _____ Country _____

Father's Full Name: _____ Denomination: _____

Mother's Maiden Name: _____ Denomination: _____

Address: _____
City, State, Zip Code

Phone #: _____ Email _____

Sponsor _____ Proxy _____

Sponsor _____ Proxy _____

Confirmation Saint: _____

Baptismal Information for those being confirmed and/or receiving 1st Holy Communion

_____ Date Baptized _____ Church Baptized _____ Church Address

If candidate not baptized at Holy Family Cathedral, has baptismal certificate been received? Yes No

If candidate for Confirmation, has 1st Holy Communion been verified? Yes No

OFFICE USE ONLY

1st Holy Communion Date: _____ Celebrant: _____

Confirmation Date: _____ Celebrant: _____

Noted in Sacramental Records

Certificate Mailed

Home Parish Notification

Marital Status: Never married Married Widowed Divorced

Married in the Church? Yes No Date of Marriage: _____

Is this your 1st marriage? Yes No

If not 1st marriage, resolution of prior marriage(s): _____

Current Spouse's Full Name: _____ Religion at time of marriage: _____

Is this spouse's 1st marriage? Yes No If not 1st marriage, resolution of prior marriage(s): _____

Additional Comments: _____

Further Action Required: _____

Sponsor Letter Received Yes No