

St. Patrick Catholic Church
2016-2017 CONFIRMATION JOURNEY
 825 7th Street, Rodeo, CA 94572 (510) 799-4434, (510) 799-5681 fax
 Website: www.stpatrickrodeo.org Email: ffe@stpatrickrodeo.org

Sacrament Information Form #1
Due September 18, 2016

Please circle
 Phase I Phase II

Name of Candidate _____

Sacraments	Received at St. Patrick Church, Rodeo, CA (date: xx/xx/xxxx)	Received at another parish (date: xx/xx/xxxx)
Baptism <i>(Certificate must be turned in unless student was baptized at St. Patrick Church, Rodeo)</i>	Date: _____ / _____ / _____	Church Name: _____ Address: _____ _____ _____ Date: _____ / _____ / _____
First Holy Communion	Date: _____ / _____ / _____	Church Name: _____ Address: _____ _____ _____ Date: _____ / _____ / _____
Received First Reconciliation (circle)	Yes	No