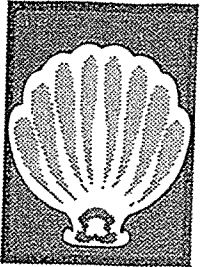


Record of the Sacraments of Initiation

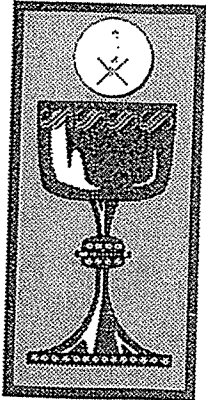
BIRTH

Your name _____
 The date of your birth (month, day, year) _____
 Child of (Your father's full name) _____
 (Your mother's maiden name) _____



BAPTISM

Date of Baptism _____ 19 _____
 (month) (day) (year)
 Parish _____ City _____
 By the Reverend _____
 Godparents _____ and _____



COMMUNION

Date of First Communion _____ 19 _____
 (month) (day) (year)
 Parish _____ City _____
 By the Reverend _____

CONFIRMATION

Date of Confirmation _____ 19 _____
 (month) (day) (year)
 Parish _____ City _____
 By the Most Reverend _____
 Your confirmation name _____ Age _____
 Your sponsor's name _____
 Your sponsor's parish _____
 City _____ State _____

