CELEBRATION OF CONFIRMATION DIOCESE OF FERNS

St. Senan's Parish, Enniscorthy



CANDIDATE INFORMATION

NAME OF CANDIDATE:	
CHOSEN CONFIRMATION NAME:	
DATE OF BIRTH:	
PARISH OF BAPTISM:	
Sponsor's Name:	
PRIMARY SCHOOL:	

I wish to celebrate the Sacrament of Confirmation and look forward to hearing from the parish about plans for scheduling when it is safe to do so

SIGNED BY CANDIDATE:

WITNESSED BY PARENTS/GUARDIANS:

If your child was baptised outside of this parish and you have not yet provided a copy of their baptismal certificate to the parish, please include a copy with this form.

CONTACT DETAILS

FATHER'S/GUARDIAN'S NAME								
Mother's/Guardian's Name:								
FAMILY CONTACT MOBILE NUMBER:								
FAMILY CONTACT E-MAIL ADDRESS			 					
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FAMILY POSTAL ADDRESS								

I/We support ______`'s application for Confirmation and will continue to help them in their preparation.

I/We furthermore consent to the information on this application form being used by the parish of St. Senan in order to contact us about sacramental preparation and celebration, subject to the relevant General Data Protection Regulations.

Please note: Family contact *mobile number* **and** *email* are required to ensure the parish can maintain effective and timely communication with you as may be necessary.

Privacy Notice and Data Protection Consent

The information in this form will be used by the parish to facilitate the celebration of your child's confirmation and to register the confirmation in the appropriate parish. The parish is the data controller for the data you provide on this form and can be contacted at: **St. Senan's Parish Office, Community Centre, Templeshannon, Enniscorthy, Co. Wexford.** If your child was baptised in a different parish, information regarding your child's confirmation will be sent to the parish where your child was baptised so that the confirmation can be registered. The information on the form will not be otherwise shared by the parish. The form will be destroyed within 12 months of your child's Confirmation, however, the information in the Sacramental Register will be retained permanently. By signing this form, you consent to the parish of **St. Senan** collecting and processing the data on the form as outlined.

Please return this form (and copy of Baptismal Certificate, if required) to St. Senan's Parish Office, Community Centre, Templeshannon, Enniscorthy, Co. Wexford. Email: <u>saintsenan@gmail.com</u>

SIGNED:

PARENT(S) / GUARDIAN(S)