



Bridgend Deanery

Sacrament of Confirmation Request Form

I(Candidate's **Full Name**)
wish to receive the Sacrament of Confirmation this year.

Signed.....Date.....

Home address.....
..... Post Code:

Name of your home Parish and priest (i.e. your regular church for Mass)
Parish Name.....Priest's name.....

Date of Birth: Date of Baptism:

Church of Baptism

FULL Address of Church of Baptism:
.....
..... Post Code:

(a copy of Baptismal Certificate required if Candidate was baptised outside the United Kingdom)

First Home name and relationship to you (e.g. Mum/Dad etc.)
.....

Home Contact telephone number.....

Any medication/conditions we need to be aware of for the preparation days:
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.....

Home Emergency Name, relationship to you and contact number (for Preparation Days):

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.....

Name address and contact number of your Doctor's Surgery (for Preparation Days):

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.....
.....

Parents/Guardians Names & Address:

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.....
.....
.....

I agree for my son/daughter to join the preparation class for the Sacrament of Confirmation. I understand that my son/daughter is expected to **attend all preparation days** and to be present at Sunday Mass, and I will support them in this.

Signed **Date:**
Parent/Guardian/Adult Confirmation Candidate

DATA PROTECTION PRIVACY NOTICE AND CONSENT

All personal data held for the purposes of preparing for and receiving the Sacrament of Confirmation in Bridgend Deanery will be treated as strictly confidential. This information will be shared with your home parish and the parish where you/your child was baptised for the purpose of updating their sacramental record/parish register; completing Confirmation Certificates; and with emergency services in the instance of a medical emergency during preparation days. We will only share your data with third parties outside of the parish for other reasons with your consent.

We keep your personal data for no longer than reasonably necessary, in this instance for a period of three months from the date of your signature below in order to complete home parish registration/certification processes.

By signing this form you are confirming that you have read this Data Protection Notice and that you are consenting to St Mary's Parish Secretary, St Mary's Catholic Church, 39 Ewenny Road, Bridgend CF31 3HS holding and processing your personal data for the above aforementioned purposes.

SignedParent/Guardian/Adult Confirmation Candidate

Date:.....