



ARCHDIOCESE OF
Gatineau

Certificate of Confirmation

NAME AND ADDRESS OF PARISH

Dissolved Parish or Church: _____

FAMILY NAME		FIRST NAME	
DATE OF BIRTH (Y-M-D)		DATE OF BAPTISM (Y-M-D)	
PARISH OF BAPTISM			
FATHER OR OTHER CIVIL FILIATION		MOTHER OR OTHER CIVIL FILIATION	
DATE OF CONFIRMATION (Y-M-D)	MINISTER		
PLACE OF CONFIRMATION (MUNICIPALITY, PROVINCE, COUNTRY)			

SEAL

ISSUED ON

DEPOSITARY OF REGISTERS
Code of Canon Law, canon 535 § 3

September 2021