



**ROMAN CATHOLIC CHURCH**  
**ST. BONIFACE PARISH-PIONIERSPARK**  
 FORSYTHE STREET 31  
 P.O.BOX 98531, HOCHLAND PARK  
 WINDHOEK, NAMIBIA  
 TELL: 061402897/061242725



[stboniface@ominamibia.com](mailto:stboniface@ominamibia.com)

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**REGISTRATION FOR ADULT CONFIRMATION**

FULL NAMES.....  
 D.O. B.... /...../.....SEX; M..... F.....PLACE OF BIRTH.....  
 ADDRESS.....CELL.....  
 PLACE OF MARRIAGE: .....DATE:...../...../.....

**PREVIOUS RELIGIOUS INFORMARTION**

RELIGION .....

DATE OF BAPTISM.... /...../.....

PLACE OF ACCEPTACE:.....

IF CATHOLIC DATE OF 1<sup>ST</sup> HOLY COMMUNION: ...../...../.....

**GIVE 2 VALID REASONS WHY YOU WOULD LIKE TO JOIN CATHOLIC FAITH :**

1. ....
2. ....

**GOD PARENTS**

FULL NAMES:.....

ADDRESS:.....

CELL NO. G.FATHER;.....G.MOTHER:.....

**DOCUMENTS TO ACCOMPANY TO REGISTER**

1. COPY OF BAPTISM CARD
2. COPY OF BAPTISM CARD OF GOD PARENTS
3. MARRIAGE CERTIFICATE
4. 1<sup>ST</sup> HOLY COMMUNION CERTIFICATE

**GENERAL INFORMATION**

FEEES OF N\$50.00 FOR EACH SACRAMENT TO BE RECEIVED

RECEPTION WILL TAKE PLACE DURING EASTER FOR NON-CATHOLICS AND LATER DATE FOR CATHOLICS