

PLEASE PRINT

ST. MICHAEL, Newark, NY

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APPLICATION for PREPARATION to RECEIVE the SACRAMENT of CONFIRMATION

Candidate Name _____ Nick Name _____ Date of Birth _____ Age _____

Candidate Address _____

Candidate E-mail Address _____

Home Phone _____ School _____ Grade _____

Date of Baptism _____ Church (Baptized) _____

Please provide complete information: Church Address _____

_____ City _____ State _____ Zip _____

Father Name _____

Mother First Name & Maiden Name _____

Parent E-mail _____

Parish where Family is Registered _____

(Written permission required from Pastor for those not registered at St. Michael Parish)

If there is a second parent's mailing or email address, please continue on the back of this form.

For Office Use ONLY	
<input type="checkbox"/>	Permission
<input type="checkbox"/>	Picture
<input type="checkbox"/>	Fee
<input type="checkbox"/>	Baptismal Certificate
<input type="checkbox"/>	Sacrament dates

DIOCESAN REQUIREMENTS

- Pray and attend Mass weekly** while completing the Confirmation Mass Journal
- Child must be currently enrolled in their second consecutive year of Catholic School or Catholic Religious Education at Saint Michael and attending regularly.**

Place of **2016–2017 Catholic Religious Instruction** _____

Place of **2017–2018 Catholic Religious Instruction** _____

- Celebrated Baptism, Reconciliation, Eucharist**
Month/Year of **First Reconciliation** _____ Month/Year of **First Eucharist** _____

- High School or 8th grade student
- Attend Retreat for Year 1 and Year 2
- Attend Parent/Candidate Pilgrimage (October 2017?)
- Attend Sponsor/Candidate Sessions at end of Year 2
- Attend Rite of Becoming a Candidate (Date to come)
- Attend Covenant Mass (Sunday before Confirmation)
- Attend General Rehearsal (prior to Confirmation)
- Successfully completed approved service ministry requirements (10 hours **minimum**)
- Attend all group sessions/classes
- Complete Staff Interview

- Material & Activity Fee \$40.00** Cash _____ Check # _____ Paid \$ _____ Date _____
Make Check Payable to St. Michael Church

I HAVE READ AND AGREE TO THE DIOCESAN REQUIREMENTS. I WILL HELP MY CHILD MEET THESE REQUIREMENTS. I UNDERSTAND THAT ALL REQUIREMENTS MUST BE MET BEFORE CELEBRATING THE SACRAMENT OF CONFIRMATION.

Parents/guardians of participants are advised that photographs or videotape of participants may be used in publications, websites, or other materials produced from time to time by St. Michael Church, the Division of Youth and Young Adult Ministry, or the Diocese of Rochester. (Participants would not be identified, however, without specific written consent.) Parents/guardians who do not wish their child(ren) to be photographed or filmed should so notify the Division in writing. Please note that the Division has no control over the use of photographs or film taken by media that may be covering the event in which your child(ren) participate(s).

Parent Signature _____ Date _____