St. Therese Of Lisieux

SACRAMENT OF CONFIRMATION (PHASE 2)

REGISTRATION FORM

2017-2018

*(Please register by **JUNE 30, 2017**)*

Name_____
(last) *(first)*

Address_____
(street) *(city)* *(zip)*

Student Birth Date _____ **Gender:** Male Female

Grade (*in Sept. 2017*) _____**School (*in Sept. 2017*)**_____

Home Phone #_____ **Calling Post #** _____
(For Snow/Emergency Class Cancellations)

Father's Name _____ **Father's Cell #** _____

Mother's Name _____ **Mother's Cell #** _____
(provide first name & maiden name)

Parent Email_____ **Parent Email** _____
(For Student Related Notifications) **(For Parish Related Notifications)**

RECORD OF BAPTISM

*Copy of the baptismal certificate is also required if your child was **NOT** baptized at St. Therese, or did **NOT** receive First Communion at St. Therese.*

Date of Baptism: _____

Church of Baptism:_____

Address of Church:

Street: _____ City: _____ State: _____ Zip: _____

PARISH INFORMATION

Indicate the parish of which you are a member; it is recommended that your child receive the sacrament of Confirmation at the church where your family are registered parishioners.

Name of Church: _____ **City:** _____

CONFIRMATION INFORMATION

*If you have NOT yet decided on a name and/or sponsor you **MUST** notify the office with this information by **OCTOBER 1st, 2017.***

Confirmation Name:_____

Name of Sponsor:_____

*If the sponsor is **NOT** a member of St. Therese Church a **Certificate of Eligibility** is required from the **sponsor's parish**.*
***Reminder:** A sponsor cannot be the candidate's parent, must be at least 16 years old and have received all the sacraments of initiation.*

SACRAMENTAL FEE: $200.00 per candidate

(Sacramental fee covers the candidate's preparation materials, sessions, retreat and ceremony.)
Registration is not contingent upon payment of fee; no child is denied sacramental preparation if a family is unable to pay fee.

Date:_____ Paid Cash_____ Paid Check #_____ *(Please make payable to: St. Therese)*

*Teens are also required to complete a
BRANCHES **High School Youth Ministry Registration/Medical-Permission Form**