

CONFIRMATION PROGRAM REGISTRATION FORM YEAR 1

Check if new address from 8th grade records

Candidate's Full Name: _____

Candidate's Date of Birth: _____

Address: _____

City, State, Zip: _____

Phone #: _____ Cell # _____

Parent E-Mail(s) required: _____

(All communication will be via e-mail)

Father's Name: _____ Mother's Name: _____

(Please include maiden name)

SACRAMENT/RELIGIOUS EDUCATION HISTORY

Date of Baptism: _____ Parish of Baptism: _____

*If not baptized at St. Elizabeth Ann Seton,
please attach a copy of the candidate's Baptismal certificate.*

Date of First Eucharist: _____ Parish: _____

Date of First Reconciliation: _____ Parish: _____

Has the Candidate successfully completed Religious Ed, Grades 1 - 8 Yes No

If not, please indicate years missed: _____

Which High School will the Candidate be attending? _____

Please Circle Confirmation Class Meeting Preference

Sunday: 4:30pm – 6:00pm OR Monday 7:00 pm -8:30pm

Note: Class selection is not based on previous Religious Education History. Class selection is based on availability and volunteer catechists. Class schedules/assignments will be finalized by August. It is not always possible to place your teen in the class of his/her choice.

_____ My \$60 Tuition payment is enclosed. (Separate forms/payments will be collected for the retreats.)

Check# _____ Date _____

PLEASE COMPLETE THIS FORM AND COVENANT, PLACE IN AN ENVELOPE MARKED "CONFIRMATION" AND RETURN WITH YOUR REGISTRATION FEE TO THE MEETING ON 4/1 OR TO THE CONFIRMATION MAILBOX IN THE CHURCH VESTIBULE BY 5/15.

Confirmation groups meet in the classrooms. Candidates will not be placed in groups until we have enough catechists for all. If you are considering becoming a catechist, please contact Shannon Jones at 201-407-6995 or confirmation@stelizabethschurch.org.

**St. Elizabeth Ann Seton Parish
Media Release for 2020-2022 Confirmation Program**

For your protection and privacy, we at St. Elizabeth Ann Seton Parish ask your permission to potentially use your child's picture in publications and/or bulletin boards, website, social media, and newspaper, should we desire. Names will not be posted.

I give my permission to use my child's picture on the parish/diocesan website/social media, in local newspapers, and/or in parish/diocesan publications/bulletin boards.

Do not use my child's picture on the church publications.

Name of Student: _____

Parent / Guardian Signature: _____ **Date:** _____

COVENANT

THE CANDIDATE:

I have heard the invitation from this faith community and understand what is being asked of me during this time of preparation for Confirmation:

- I will participate in all small/large group sessions, retreats, liturgies, and service projects. I will manifest a positive, open-minded, and cooperative attitude while participating in these activities.
- I understand that absences will require makeup or I will repeat the year.
- I will attend Mass weekly.
- I understand the necessity of order and discipline as a part of candidacy and am aware of the formation and the purpose of the Confirmation Team.
- I will donate at least thirty hours of meaningful Christian service to my community, Church, and those in need over the course of the program.

Candidate

Date

THE PARENT(S):

To my son or daughter: I am also aware of what is being asked of you during this Confirmation preparation, and I promise to support your commitment. I promise to pray with you and for you; I promise to discuss your ideas and opinions with you; I promise to be generous with my time; and I promise to be faithful to you, to Jesus, and to the Church.

Parent

Parent

THE PASTOR:

Dear Candidates, as your Pastor, I want you to know how important you are to God, to the Church, and to me. I am ready to help you as you go through this time of preparation and I will be praying for you during your faith journey.

Pastor