



# 2011-2012 Confirmation Application

## Southeast Catholic Religious Formation

Immaculate Conception ~ Nativity of the Lord ~ Sacred Heart of Jesus ~ St. Augustine of Hippo ~ St. Paul ~ St. Veronica

### FAMILY INFORMATION:

Family Last Name: \_\_\_\_\_

Primary Mailing Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Parish:             Immaculate Conception             Nativity of the Lord             Sacred Heart of Jesus  
                       St. Augustine of Hippo             St. Paul             St. Veronica

### PARENT CONTACT INFORMATION:

Candidate lives with:    Father             Mother             Both             Other: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Father's Email Address: \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Small Group Leader             Attend Retreat             Provide Snacks             Other: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Mother's Email Address: \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Small Group Leader             Attend Retreat             Provide Snacks             Other: \_\_\_\_\_

### CANDIDATE INFORMATION: PLEASE ATTACH A COPY OF YOUR BAPTISMAL CERTIFICATE FOR ACCURATE RECORD KEEPING!

Full Name: \_\_\_\_\_  
First, Middle, Last

School Currently Attending: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

Place of Baptism:    Church: \_\_\_\_\_

Address: \_\_\_\_\_

Phone:            (\_\_\_\_) \_\_\_\_\_

I have received the Sacrament of Penance (Reconciliation)             YES    NO

I have received the Sacrament of Holy Communion:             YES    NO

**Emergency Contact Information (Non-parent):**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Is there anything we should know about your child in order to better serve their needs (e.g. allergies, learning disabilities, attention deficit and/or hyperactive disorders, etc.). Please describe:

\_\_\_\_\_

**For security reasons, PLEASE DO NOT SEND CASH!!!**

**There is no tuition assistance provided for sacramental preparation. Please contact me if there is a concern.**

**Confirmation Fee: \$160.00**

Includes all activities and materials. (e.g. retreat)

- My full payment is enclosed. **Check Number:** \_\_\_\_\_
- I am paying \$20 and will complete my payments by **September 1, 2011**. **Check Number:** \_\_\_\_\_

Please Make Check Payable to:

**St. Veronica Congregation**

**Office use Only:**

Paid:

Check Number:

Balance:

It is an honor that you chose to receive the Sacrament of Confirmation! Please know that the Office of Youth Ministry is here to assist you and your family along this important journey. Please do not hesitate to contact us, as we are here to serve you.

As a candidate for the Class of Confirmation 2012, we ask that you make the following commitment to the program. Please indicate below your intentions by checking each box:

- I understand that in order to be properly prepared for the Sacrament of Confirmation I must faithfully attend mass weekly, participate in Religious Education classes, participate in Confirmation activities, attend the Confirmation retreat, take the Confirmation Interview, keep a record of 20 service hours, write a letter of intent to the Archbishop, and complete any other work designated by the Youth Minister.
- I will hold true the values of the Catholic Church and do my best to make choices that live as an example of the Gospel.
- I accept the responsibility of all the requirements in preparation for the reception of the Sacrament of Confirmation.
- I am aware that the Archdiocese of Milwaukee determines that confirmation should be celebrated at approximately the age of 16 or when I am in the 11<sup>th</sup> Grade. Also, I have had at least one year of religious education prior this sacrament.

Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Picture Release:* I understand that my child may be photographed for program purposes while participating in religious education or sacramental preparation classes. The photos may be used in the parish bulletin, website, or newsletter.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# CONFIRMATION NAME AND SPONSOR INFORMATION

## CONFIRMATION CANDIDATE:

A name identifies you in a unique way. One of the traditional practices in the Catholic Church at the time of Confirmation is choosing a name that will remind you of this sacrament. After prayerful reflection, you may want to choose a name. However you may want to recommit yourself to your Baptismal name since it expresses the relationship that exists between the two sacraments, especially after you reflect on its meaning and discover some of the people who shared your name in Christian history.

If you do want to take a new name, you need to choose the name of a saint who represents the type of person you are or wish to be. It is important to learn about your patron saint for many reasons. You are asking this saint to be your friend and advocate for the rest of your life. Whether you decide to stay with your Baptismal name or pick a new name, take the time to research and explore the root meaning of the name you will be confirmed as. Also, you will be asked to explain why you chose that name and the meaning it has to you. If you do not choose a name, you will be asked to do the same explanation for your Baptismal name.

A list is attached to show possible name choices. In order to learn more about your saint there are resources online that you can go to research in preparation for your Confirmation.

- [www.catholic-forum.com](http://www.catholic-forum.com)
- [www.catholic-saints.info](http://www.catholic-saints.info)
- [www.catholic.org](http://www.catholic.org)
- [www.cin.org](http://www.cin.org)

Your Given Name: \_\_\_\_\_  
First and Last

Your Confirmation Name: \_\_\_\_\_  
(As you want it to appear on your certificate)

Name on Certificate: \_\_\_\_\_  
(Put the names together)

### **Example of Form:**

If I took Mary as my confirmation name, this is how I would fill this form out and how it would appear on my certificate:

Your Given Name: Deborah Barycki

Your Confirmation Name: Mary

Name on Certificate: Deborah *Mary* Barycki

**If you are undecided about choosing whether you want a confirmation name, please write “UNDECIDED” on the line, and return with registration form.**

**Requirements When Choosing Your Sponsor:**

- Sponsors must be designated by the one to be confirmed;
- Must be at least 16 years of age;
- Must be confirmed and practicing Catholic who has received the sacrament of Eucharist and leads a life in harmony with the faith and the role to be undertaken;
- Cannot be bound by any canonical penalty legitimately imposed or declared;
- Cannot be the mother or the father of the one to be confirmed (c. 874)

\*Requirements for sponsors are guidelines created by the Archdiocese of Milwaukee (page 41)

\*Be sure that sponsors meet all the above requirements before submitting

**SPONSOR INFORMATION:**

**Full Name:** \_\_\_\_\_  
First, Middle, Last

**Street Address:** \_\_\_\_\_

**City / State / Zip:** \_\_\_\_\_

**Contact Phone Number:** (\_\_\_\_) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Parish Where Sponsor was confirmed:**

**Parish:** \_\_\_\_\_

**City / State / Zip:** \_\_\_\_\_

**Parish Where Sponsor holds current membership:**

**Parish:** \_\_\_\_\_

**City / State / Zip:** \_\_\_\_\_

**Sponsors are an important aspect to your spiritual journey. If you are undecided about choosing your sponsor, please write "UNDECIDED" under "Full Name." Sponsors will be given information so please make a decision by September 1, 2011.**

**If you have any questions regarding any information please contact Debbie Barycki at:**

[debbiebarycki@saintveronica.org](mailto:debbiebarycki@saintveronica.org)  
414-481-0777 ext. 135