

Confirmation Registration Student Information

Name : _____ M / F date of birth: ____/____/____
first middle last sex month day year

Confirmation, the third Sacrament of Initiation, follows upon reception of the Sacraments of Baptism and Eucharist. Please complete, to the best of your knowledge, the following sacramental information:

BAPTISM date: ____/____/____ location: _____
month day year name of church religion city state

FIRST COMMUNION date: ____/____/____ location: _____
month day year name of church city state

SPECIAL NEEDS *Please indicate any special needs due to health, allergies, physical or learning disabilities.*

Parent Information

FATHER Name : _____ Religion: _____
first middle last

Address: _____ Telephone: _____
street address city state home cell work

Email address: _____

MOTHER Name : _____ Religion: _____
first middle last

Address: _____ Telephone: _____
street address city state home cell work

Email address: _____

Parent Volunteer Assistance

Check any of the following volunteer tasks for which you could help out:

- Small Group Leader * Offer our home as a meeting place for a Confirmation group
 Assist with the Archdiocesan Youth Event

* *group leaders receive a \$75 discount per year on tuition*

Tuition

\$75 Tuition per Year; \$150 Total Cost for 2 year Confirmation program

- cash check (payable to Church of St. Dominic) VISA / MasterCard _____ / _____
card num. *exp. date*

*Tuition financial assistance is available. Contact Mara Mangan at 507-645-8816, ext. 205
Contributions to our tuition fund will provide for families in need are in need of assistance.*



St. Dominic Confirmation Commitment

I, *(please print your name)* _____ am aware that receiving the Sacrament of Confirmation is a commitment of my life to God and the Church as an active, believing adult Catholic. With my signature below, I accept the leadership and guidance of the St. Dominic Faith Formation staff in helping me prepare to make that commitment.

I therefore commit myself to attend and participate to the best of my ability in the following aspects of the Confirmation preparation program:

- **large group meetings** (these meetings provide essential formation for the full team of Confirmation candidates)
- **small group meetings** (these meetings provide the core of learning about and discussing various aspects of our Catholic Christian faith)
- **chapel visits** (the visits scheduled each year help students become more comfortable in personal conversation with God both in the chapel and in private prayer at home)
- **Archdiocesan Youth Day** (mandatory for students in their first year of Confirmation preparation, this event gives students a sense of enthusiasm for the faith in a lively experience with over 2,000 Catholic youth from around the archdiocese in attendance)
- **retreat** (the retreat scheduled during the second year of Confirmation preparation helps deepen the student's personal faith through personal testimonies and time for personal reflection. If a student is not able to attend the retreat with our group, he or she must arrange to attend with another parish)
- **service projects** (providing service to others, students develop an awareness of their personal ability to make a positive difference in the lives of others, receive the personal satisfaction of having done so, and prepare for the Confirmation commitment of putting one's life at God's service)

In case that, due to sickness or some other emergency, I am not able to be present for any of the required meetings or events, I promise to contact my small group leader and Mara Mangan, Director of Faith Formation Program, with as much prior notice as possible, and arrange to make up for any absences.

Signature of candidate: _____ date: _____

Parental Commitment

Mindful of the importance of the Confirmation commitment for which my/our child is preparing, I/we promise to encourage and support him/her by word and example in the completion of the preparation requirements and living the Catholic Christian faith.

Signature of parent(s): _____ date: _____

Return completed registration form to: Church of St. Dominic, 216 Spring St. No., Northfield, MN 55057