



APPLICATION FOR THE RECEPTION OF THE SACRAMENT OF CONFIRMATION

Directions: Please print clearly. Correct spellings and accurate dates and addresses are important. Please **MAIL** this application by **Thursday, October 1, 2009** to Religious Education Office, 140 Broad Street, Swedesboro, NJ 08085.

In order to be eligible to apply for the Sacrament of Confirmation, the child must have completed four consecutive years in either a Parish Religious Education Program or Catholic School by the date of the Confirmation.

Full Name of Candidate: _____

Date of Birth: _____ Birth City & State: _____

Grade: _____ Age at time of Confirmation: _____ Phone #: _____

Father's Name: _____
(first) (last)

Mother's Name: _____
(first) (maiden) (last)

Address: _____
(#) (street)

(city) (state) (zip)

Record of Baptism and First Eucharist

(Office Use Only)

Date of Baptism: _____ Baptism Certificate on file : Y or N

Date of First Eucharist: _____ First Eucharist Certificate on file : Y or N

Family Agreement

We understand that by applying to receive the Sacrament of Confirmation, we willingly commit to the following:

- Lifelong attendance at Mass on Sundays and on Holy Days of obligation
- Lifelong celebration of Penance and Eucharist
- Attendance this year (before Confirmation) at one or more spiritual activities other than Mass or Penance and continuation of lifelong participation in spiritual activities
- Completion of the minimum amount of service and continuation of lifelong service
- Attendance at the parent meeting
- Attendance at the Confirmation retreat
- Attendance at the rehearsal
- Lifelong religious education for parents and child, especially through the completion of 8th grade.

By signing this form, we agree to adhere to all parish requirements for the celebration of the Sacrament of Confirmation.

(candidate)

(parent(s)/guardian)