2023-2024 Saint Anne Parish Confirmation Registration Form

Please read and initial the information in the column to the right.

Parent/Guardian Information

Family Name:_____

Father's Full Name:_____

Cell Phone: _____ Work Phone: _____

Mother's Full Name: _____Maiden Name:_____

Cell Phone: _____ Work Phone: _____

Mailing Address:_____
Street *Town & State* *Zip*

Email Address:_____ Home Phone: _____

Emergency Contact
Person other than Parent:_____ Phone:_____

FIRST CHILD

Name:_____ Date of Birth:_____

Medical Condition(s):_____ Place of Birth:_____

School of Attendance:_____ Grade for 2023-2024 _____ [ ] Male [ ] Female

CONFIRMATION: 6 sessions

[ ] Online—Ongoing throughout the year—Video will be sent with attachments

Sacraments already received:

[ ] Baptism (Church_____)[ ] 1st Reconciliation (Church _____)

[ ] 1st Eucharist (Church_____)

SECOND CHILD

Name:_____ Date of Birth:_____

Medical Condition(s):_____ Place of Birth:_____

School of Attendance:_____ Grade for 2023-2024: _____ [ ] Male [ ] Female

CONFIRMATION: 6 sessions

[ ] Online—Ongoing throughout the year—Video will be sent with attachments

Sacraments already received:

[ ] Baptism (Church_____)[ ] 1st Reconciliation (Church _____)

[ ] 1st Eucharist (Church_____)

I understand that:

Registration forms may be returned by mail only when accompanied by full payment.

Registration forms with partial payment or in need of other arrangements, including scholarships, must be completed in the office with a faith formation staff member.

Registration forms received without payment will not be able to be processed.

Any outstanding fee from the previous year should be satisfied at the time of any new registration.

_____
Initials of Preparer

2023/2024 Fee Schedule:

Program Fee:
Per Child $75.00
Retreat fee included in cost

Non-Parishioner*
Program Fee:
Per Child $150.00

- ***Non-Parishioner fee applies to those who wish to participate in the St. Anne Faith Formation Program but are not a registered family at Saint Anne Parish.***
- ***Registering in the Parish for the sake of the Faith Formation Program does not qualify you for the regular program fee until you have been registered parishioners for 1 year.***
- ***Families newly relocated, by way of a new physical address, would be considered regular parishioners and the regular program fee would apply.***

CANDIDATE COMMITMENT

As a candidate for Confirmation, I agree to the following:

- I understand that missing more than one out of the six classes may mean re-doing the program the next year.
- I understand that I am required to attend a retreat.
- I will approach my Confirmation journey with an open mind and an open heart.
- I will be respectful of the leaders of the program and the other students.
- I will attend Mass every Sunday and on all holy days of obligation.
- I will receive the Sacrament of Reconciliation before my Confirmation.
- I will accept more responsibility in my family, parish, and community by putting my talents and gifts at the service of others.

As I make these promises, I ask God to give me the grace to be open to his plans for my life—plans he reveals to me in prayer, in my talents and aspirations, and in the encouragement of those who know and love me. I place myself in the loving embrace of the Father, Son, and Holy Spirit in asking for help in fulfilling this commitment.

_____ _____ _____

Name of Candidate (Print) Signature of Candidate Date

_____

Witnessed by: Signature of Candidate's Parent/Legal Guardian

For Office Use:

Date Recv'd: _____

[ ] By Mail
[ ] In Office

Total Due: _____

Payment Recv'd: _____

[ ] Check # _____
[ ] Cash
[ ] Credit

Balance Due: _____

Registration taken by: _____
(Initialed)

VOLUNTEER SUPPORT

Your support assists in providing a quality experience of faith formation for your child. Please indicate grade levels and areas that you would be willing to assist.

I am willing to serve, where appropriate as:
[ ] Aid/Assistant

My signature indicates that to the best of my knowledge the information I have provided on this registration form is accurate and true.

_____ _____
Signature *Date*

SCHOLARSHIPS

Scholarship assistance is available on a limited basis and is considered on a case by case basis. Please talk with Pam Walsh or Joan Virga for specifics and how to apply.

Return completed registration form along with payment to :

Saint Anne Parish
Faith Formation
26 Emerson Avenue
PO Box 339