

# Blessed Sacrament Church Confirmation 2017-2018

## Middle School Registration (6th Grade)

Confirmation classes will be held on Wednesday evenings, 6-8 pm, beginning September 13th, 2017 and will conclude in late April 2018. If the candidate is NOT baptized at Blessed Sacrament Church, please provide the office with a copy of his/her baptismal certificate attached to this registration. All candidates will be required to attend weekly sessions, one day retreat, weekly Sunday Masses and complete a community service project.

Fee \$75      Date Paid \_\_\_\_\_ (if assistance is needed to cover fee, please contact the office)

**Candidate Information:**                      Grade entering into this fall \_\_\_\_\_

Name \_\_\_\_\_ Registered Parish \_\_\_\_\_  
Last                      First                      Middle

Home Address \_\_\_\_\_

Street address                      City/State                      Zip code

School: (Please Circle)      Southwest      West      STM      Home School      Other \_\_\_\_\_

Candidates Birth Date \_\_\_\_\_      Baptism Date \_\_\_\_\_

Church baptized \_\_\_\_\_      Address of Church \_\_\_\_\_

(Please attach a copy of the Baptismal Certificate)

**Parent 's Information**                      Email Address: \_\_\_\_\_

Father's Full Name \_\_\_\_\_      Mother's full Name \_\_\_\_\_

**Phone Numbers:**                      Mother's Maiden Name \_\_\_\_\_

Parent's Home \_\_\_\_\_      Parent's Cell \_\_\_\_\_      Student's Cell \_\_\_\_\_

I give BSC permission to:

- Text my son/daughter about confirmation sessions/church activities?      Yes / No
- Take photos of my son/daughter to use on bulletin boards, our websites and face book ?      yes/no

### **Parent Signup:**

We ask parents to please sign up to assist in one of the following activities:

\_\_\_\_\_ Weekly Small Group Leader (15 needed)                      \_\_\_\_\_ Retreat Team (10 needed)



**Turn over to complete Sponsor Information**

*Please turn into the office or place in offertory basket during Mass, **before Friday August 25th.** For additional information, please contact Denise Maher, Director of Youth Formation, (605)342-3336.*

Candidate Name \_\_\_\_\_

**Sponsor Information:**

*(Steps to selecting a sponsors)*

1. Sponsor should be 18 years of age and should not be a parent.
2. Sponsor should be a local resident.
3. Sponsor should be in good standing in their parish.
4. Sponsor must be available to attend Wednesday night sessions once a month.

Sponsor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street address

City/State

Zip Code

Email Address \_\_\_\_\_

Parish where sponsor is registered: \_\_\_\_\_

Address \_\_\_\_\_

Street address

City/State

Zip Code

Parish where Sponsor was confirmed \_\_\_\_\_

Address \_\_\_\_\_

Street address

City/State

Zip Code

**Please have below form signed if sponsor is not a member of BSC.**

**I confirm that the above person is an active member of my parish and I would recommend them in the role of a confirmation sponsor.**

\_\_\_\_\_

**Pastor Signature**

\_\_\_\_\_

**Parish**

\_\_\_\_\_

**Date**

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