



Our Lady of Guadalupe Parish Shrine

Faith Formation Office

55A Warwick Road Stratford NJ 08084

Tel. (856) 627 – 222 Ext. 109

Email: ghernandez@guadalupeshrinenj.org

Registration Form for Confirmation Retreat 2026

Candidate's Name: _____ **Payment: \$** _____

Parents' names: _____ **&** _____

Phone Number: _____

Grade: _____ **Gender: F M** **Candidate? YES NO**

Confirmation Retreat, **January 24th, 2026**

Registration starts at 9:30 am

Payments can be made in cash or check (made out to **OLG**).

Must include Birth certificate, Baptism certificate, and
First Holy Communion & Confirmation (form or certificate).

Please wear comfy but modest clothes, casual shoes, appropriate for Mass.

In case of emergency:

In case of emergency, please contact: _____

Phone Number: _____

The candidate has the following medical conditions:

The candidate is currently taking the following medications:

(If the candidate must take a medication during the retreat, please include a copy of the prescription and any additional instructions related to the medication, including the doses and time when to take it)

Sponsors Names: _____

Name of Confirmation Saint: _____

Note: if you would like to donate water/juices or any snack, please contact Mrs. Gelen Hernández at (856) 627-2222, ext. 109. Or email at ghernandez@guadalupeshrinenj.org

Signature Parent/Legal Guardian

Date