Saint Bernadette Parish

## **CONFIRMATION REGISTRATION FORM**

All Saint Bernadette School pupils and Saint Bernadette PSR pupils who anticipate receiving Confirmation in Spring 2026 must register for the sacramental preparation process using this form. **Please submit a <u>\$25.00 registration fee</u> with this registration.** 

	Please Print		
Child Information			
Child's Name:			
Last	First	Middle	
Address:			
City:		ZIP:	
Home Phone:	Cell Pho	ne:	
Date of Birth:	Age at time of Confirmation:		
Was child in a catecheticc	ıl program last year? O Yes	O No	
If child was enrolled in a co	atechetical program last year,	which program:	
• St. Bernadette School • • Program at Other Catho	St. Bernadette PSR O Catholic Dic Parish:	c Homeschool Program	
Parish:			
Address:	City:	State: ZIP:	
Child's Sacramental History	Ĺ		
<u>Please submit a copy of yo</u> was baptized at Saint Berno		e with this registration form even if your child	
Has child received Catholi	c Baptism (or Profession of Fail	th)? O Yes O No	
Date:	Age:		
Parish:	City:	State:ZIP:	
Has child received First Co	mmunion? O Yes O No Do	ate:	
Parish:	City:	State: ZIP:	
Has child already received	I Confirmation or Chrismation?	O Yes O No Date:	
Parish:	City:	State: Zip:	

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## Parents Information

Father's Name:			
First	Middle		Last
Is the father Roman or Eas	tern Catholic: O Yes O No		
If no, father's religion/den	omination:		
Father's Marital Status:	• Married • Separated/	Divorced O Single	e OWidowed
Mother's Name:			
First	Middle	<u>Maiden</u>	Last
Is the mother Roman or	Eastern Catholic: O Yes O	No	
If no, mother's religion/o	denomination:		
Mother's Marital Status:	O Married O Separate	d/Divorced O Sir	ngle OWidowed
Child lives with: • Father and Mother	• Mother only • • • • • • • • • • • • • • • • • • •	ly O Other:	
Parent E-Mail: Parent email will be used	for communication reaardina (	Confirmation prepare	ation news and events.

## **ACKNOWLEDGEMENT**

Children preparing for Confirmation should be members of Saint Bernadette Parish or receive permission of their parish pastor to receive Confirmation at Saint Bernadette. Emergency medical authorization and special health concerns are completed on a separate form. I acknowledge that I have the responsibility to provide a Catholic family environment for my child, including weekly participation at liturgy on Sundays and Holy Days of obligation. It is my responsibility to ensure that my child is present and prompt for sacramental preparation events, and for me to be present at parent meetings. I understand that the contents of the Catechism of the Catholic Church as well as the magisterial documents of the Roman Catholic Church provide the doctrinal and moral content for all teaching in sacramental preparation. Finally, I understand that I may discuss any problems or concerns with the catechetical director or pastor.

Parent Signature:	
Parent Nanature.	Date:
	Daio,

OFFICE USE ONLY							
SPONSOR NAM	CONFIRMATION NAME						
Date Received	Amount paid		Check Number				
//	\$	00 • CASH	O CHECK	#			