**St. Francis of Assisi Catholic Church**

**Sacrament Preparation – Grades 6-12**

(Confirmation and/or Eucharist and/or Reconciliation)

**School Year\_\_\_\_\_\_\_\_\_\_\_**

**By signing this form, I, the parent/guardian , am requesting that my youth/teen be brought into Full Communion with the Catholic Faith through the Sacraments of Confirmation & Eucharist(if needed).**

**My youth/teen for whom I am requesting these Sacraments is:**

**Baptismal/Given Name:**

First Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Youth/Teen’s Information:**

Date of Birth - \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ Current Grade \_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City, State & Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Baptismal Information:**

Has your youth/teen been baptized Catholic? Yes \_\_\_ No \_\_\_ If not Catholic, contact leader.

Date of Baptism - \_\_\_/\_\_\_ /\_\_\_\_\_\_\_ (Please provide copy of Baptismal Certificate)

Catholic Church of Baptism - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sacrament(s) your child/teen needs to prepare for….**

 **\_\_\_ Reconciliation \_\_\_ Confirmation \_\_\_ Eucharist**

**Father/Guardian’s Information:**

First Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to youth/teen if not the Father - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mother/Guardian’s Information:** You may leave areas blank that are the same as above.

First Name - \_\_\_\_\_\_\_\_\_\_\_\_\_Middle Name - \_\_\_\_\_\_\_\_\_\_\_\_Last Name - \_\_\_\_\_\_\_\_\_\_\_\_\_Maiden\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to youth/teen - if not the Mother - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parish Membership:**

Our family is registered parishioners of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Our family attends Mass Regularly \_\_\_\_ Occasionally \_\_\_\_ Seldom \_\_\_\_ Never \_\_\_\_

**Sponsor Information:**

If your youth/teen is preparing for Confirmation, they will need a sponsor

Sponsors MUST be practicing Catholics; have completed all initiation Sacraments (Confirmation & Eucharist); be at least 16 years old; and, be a parish member in good standing in a Catholic Parish. As such, they must turn in a letter of Good Standing from their Pastor. If any questions, don’t hesitate to ask! A sample is available on request.

Sponsor’s First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State & Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone # ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Is this Home\_\_\_ Cell \_\_\_ Work \_\_\_?

 Youth/Teen’s relationship to Sponsor - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Sponsor’s Home Parish\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signatures for Sacramental Preparation Request**

I understand that my youth/teen will not be fully initiated into the Catholic Faith until they have completed preparation.

Youth/Teen’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Name – *printed* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date \_\_\_/ \_\_\_/ \_\_\_\_\_\_\_