

Saint Raphael the Archangel Parish

2016-17 Confirmation Program

Registration Form

Must be returned to the Saint Raphael office by September 6, 2016

After returning this form, the candidate for Confirmation and their parent/guardian must take part in an entrance meeting/interview with a member of the Saint Raphael Parish staff. This can be arranged by contacting the Religious Education Secretary, Ann Olig, at (920) 233-8044 or ann.olig@raphael.org. This meeting should be completed by **December 1, 2016**.

Fee: \$60 (covers class sessions, books, retreat and sacramental stipend)

Candidate (Student) Information:

Name _____

Address _____

City _____ State _____ Zip _____

Student Phone _____

Student Email _____

School _____ Year (*please circle*): Junior Senior

Date of Birth _____

Home Parish _____ City _____

Parish of Baptism _____ City _____ State _____

Completed Gr. 9 & 10 Religious Education Classes: Yes _____ No _____

Where _____

Class Selection- Indicate First and Second Choice

___ Sun. 3:40-4:55pm (Sept. 11th-April 30th)

CANCELLED Tues. 6:45-8:00pm
(Sept. 13th-May 2nd)

___ Wed. 7:45-9:00pm (Sept. 14th-May 3rd)

FULL Intensive Monthly Sunday Sessions
11:00am (Mass)-3:00pm
Sept. 18, Oct. 9, Nov. 6, Dec. 11,
Jan. 29, Feb. 12, Mar. 19, April 30

Allergies and Medications _____

Any Special Needs _____

Parent/Guardian Information:

Name(s) _____

Phone _____ Email _____

Emergency Contact Information:

Name _____

Relationship _____ Phone _____

For Office Use Only

_____ Registration Fee Pd

Date Received _____

Check # _____

_____ Baptismal Certificate