

Sacrament of Confirmation Preparation Agreement

Name of Candidate: _____

Address: _____

City, State, Zip: _____

Phone: _____ **E-Mail:** _____

Grade: _____ **School:** _____

Confirmation Saint/Name: _____

Confirmation Sponsor: _____

I, _____ (Candidate) have prayerfully considered my reception of the Sacrament of Confirmation and I freely and willingly enter this time of formation and preparation.

I have read and understand the Confirmation Guidelines and will fulfill the requirements of this program to the best of my ability. I understand that failure to fulfill the requirements of the program will postpone my reception of the Sacrament until the requirements have been satisfied.

(Signature of Candidate)

(Date)

I, _____ (Parent) have prayerfully considered my child's reception of the Sacrament of Confirmation and he/she freely and willingly enter this time of formation and preparation.

I have read and understand the Confirmation Guidelines and will support my child in fulfilling the requirements of this program. I understand that failure to fulfill the requirements of the program will postpone my child's reception of the Sacrament until the requirements have been satisfied.

(Signature of Parent)

(Date)