



CONFIRMATION COMMITMENT FORM

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

MONDAY FORMATION _____ DAY SCHOOL _____ OTHER _____

I intend to participate in the Immediate Preparation Process, and fulfill necessary requirements for the reception of the Sacrament of Confirmation.

CANDIDATE'S SIGNATURE: _____

PARENT (S) SIGNATURE: _____

* * * * *

INTENTION TO DELAY RECEPTION OF CONFIRMATION

NAME: _____

ADDRESS: _____

PHONE: _____

The reason I have decided to delay is: _____

STUDENT'S SIGNATURE: _____

PARENT (S) SIGNATURE: _____