## CONFIRMATION REGISTRATION FORM 2016-2017

ST. RITA CHURCH 1008 Maple Drive * Webster, NY * 14580 *(585) 671-1 MMarton@dor.org	
Candidate's Name:	Parent(s) Name:(First and Last)
E-mail address:	_Mother's Maiden Name:
Address: (Street)	(Town) (Zip)
Phone: () (Home)	() (Daytime or Cell) Grade
Candidate's Date of Birth:	Level: **Parishioner Number: 2016-2017 (Located on Church Envelope)
School Attending:	Must be minimum of Grade 8
First Eucharist Y N/ MM YY	First Reconciliation Y N//
**Only registered parishioners of St. Rita Church are eligible for enrollment in St. Rita Sacrament programs**	
The Sacrament fee is \$60.00. Please submit with Registration Form. (For Year 2 students who paid fee last year, please submit only \$10 this year)	
BAPTISMAL IN         Please select one:            Candidate was baptized at S            Candidate was baptized else            Name of Church	(Mo/Yr)
<ul> <li>If the candidate has received prior sacraments at St. Rita Church we should already have your Baptismal Information on file. You will be notified if another copy is needed.</li> <li>If the candidate was baptized elsewhere and has not received other sacraments at St. Rita Church, please provide a copy of the Baptismal Certificate upon enrollment.</li> <li>If the Baptismal Certificate is not provided, the candidate will not be able to participate in the Sacrament.</li> </ul>	
SPONSOR INFORMATION	
Sponsor's Name:	_ E-mail address:
Address: (Street)	(Town) (Zip)
Phone: ()(Home)	()(Daytime or Cell)
<ul> <li>* Eligible sponsors must be a minimum age of 16 years old.</li> <li>* Must have received all three Sacraments of Initiation, i.e., Baptism, Confirmation, Eucharist</li> <li>* Must be an active and practicing member of a <i>Catholic</i> Faith Community.</li> </ul>	

\* May not be the candidate's parent.