

# CONFIRMATION REGISTRATION (Please Print)

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Student's Name \_\_\_\_\_  
                                    **First**                                    **Middle**                                    **Last**

STUDENT'S CONFIRMATION NAME: \_\_\_\_\_

Date of Birth \_\_\_\_\_

**Student Baptismal Information:**

Church: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

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Parent's Name: **Father:** \_\_\_\_\_  
  **First**  **Middle**

**Mother:** \_\_\_\_\_  
  **First**  **Middle**  **Maiden Name**

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Sponsor Name: \_\_\_\_\_  
                                    **First**                                    **Middle**                                    **Last**

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

**Confirmation Fee: \$145.00. Please attach fee to this registration form and return to Religious Education office no later than January 30th.**



# DIOCESE OF ROCKVILLE CENTRE

## TESTIMONY OF DESIGNATED SPONSOR

*The role of sponsor is an important one for the Sacraments of Baptism and Confirmation. Today some may see the role as honorary, but the Church sees the sponsor, popularly called a godparent, as a fully-initiated Catholic who actively supports the newly Baptized or Confirmed by good example and instruction in the Christian life.*

*In order to be admitted to the role of sponsor, the law of the Church directs that a person must be designated specifically by the individual who is to be confirmed. To be a sponsor, a person must be a Catholic, at least sixteen years of age, and have already received the Sacraments of the Most Holy Eucharist and Confirmation. In addition, he or she must be leading a life in harmony with the faith and not be bound by a canonical penalty.*

I, \_\_\_\_\_, declare that I have been chosen to act as a sponsor for \_\_\_\_\_, who is to receive the Sacrament of Confirmation on \_\_\_\_\_ at the Church of \_\_\_\_\_ in \_\_\_\_\_.

In assuming this responsibility, I testify that:

- **I am at least sixteen years of age.**
- **I have received the Sacraments of Baptism, Confirmation, and Eucharist.**
- **I am living a life in harmony with the teachings of the Catholic Church in faith and morals.**

Understanding the role of sponsor as prescribed by the Church and aware of the obligations and responsibilities of this role, I attest that I am willing and able to accept the role of sponsor in the Catholic Church.

By my signature, I solemnly swear that I fulfill all of the requirements to be a sponsor as described above. I attest to the truth of this statement, so help me God.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Designated Sponsor*

\_\_\_\_\_  
*Parish*

\_\_\_\_\_  
*Pastor/Delegate*

*Parish Seal:*

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## Confirmation Saint Report

Choose a saint of your choice. Include in the report a brief biography of the saint.

- Where they lived
- When they lived
- What their life was like

Answer the following questions after this biography.

1. Why did you choose this Saint?
2. What qualities about this Saint did you admire?
3. How is this Saint like you?
4. How is this Saint different from you?

This report should be at least one page long. It can be typed or neatly written.

Please include your name and your religion teacher's name on the report.

Reports are due on January 30th.

You will be reading your report in your classroom on the night of the parent meeting. Your parents will be invited to the class to hear your reports.

**Reports will be presented on January 30<sup>th</sup>.**

# **CONFIRMATION SERVICE**

Christian Service is a personal response to God's invitation to love our neighbor. In the Gospels, there are many examples of Jesus reaching out to those in need. In our families, in our parish and civic communities, and in our schools, we see many people in need. By your service, you will be responding to those needs, thereby living the Gospel message.

- You are to provide a minimum of 10 hours of service. Christian service is a lifelong invitation, so whatever is begun now could be continued far beyond Confirmation.
- The dates and time you spend in service are to be recorded and signed by the person supervising your service.

Following are some areas of Christian Service you might choose to participate in. Placements are done on a first come, first serve basis:

1. **PARISH SOCIAL MINISTRY**

Help seniors in our parish community by raking or shoveling snow.  
Contact: Parish Social Ministry at 261-2485 Ext. 111.

2. **COFFEE HOUR VOLUNTEERS**

Assist the staff of the monthly coffee hour following the 9:30 Mass.  
Contact: Mrs. Terry Breen for information at [tbreener@gmail.com](mailto:tbreener@gmail.com)

3. **CHOIR**

Join the Youth/Teen Choir at Mass on the Fourth Sunday of the month.  
Contact: Mrs. Diane Larken – 261-2485 Ext. 150

4. **ALTAR SERVERS**

Serve at Mass on Sundays  
Contact: Mrs. Terry Pace 261-2485 Ext. 100

5. **ORGANIZE A COAT DRIVE**

Collect gently used coats for men, women, or children and deliver them to Nina's Pizza.  
Coats will be accepted from November 1<sup>st</sup> – November 30<sup>th</sup>.  
The owners of Nina's will be donating these to a shelter in the community  
Upon delivering the coats, you will receive a free slice of pizza!

6. **NORTHPORT-EAST NORTHPORT LIBRARY**

151 Laurel Avenue  
Northport, N.Y. 11768  
261-6930

185 Larkfield Road  
East Northport, N. Y. 11731  
261-2313

7. **PUBLIC SCHOOL VOLUNTEER PROGRAMS**

**NORTHPORT MIDDLE SCHOOL**

Your service would include:

- . Peer leadership
- . Peer tutoring
- . Student Council
- . National Honor Society

**Coordinator:** Contact your Guidance Counselor or Faculty Advisor

**EAST NORTHPORT MIDDLE SCHOOL**

Your service would include:

- . Peer tutoring
- . Community Service Club
- . National Honor Society
- . Peer facilitation (Student Resolution)
- . Stars

**Coordinator:** Contact your Guidance Counselor or Faculty Advisor

8. **ORGANIZE FOOD COLLECTIONS FOR DONATION TO THE FOOD PANTRY**

**NOTE: The service that is being provided by your child needs to be signed off by the person in charge of the program. However, if service was performed already, then a letter from the organization or person that it was performed with will need to be sent in with the original signature to the Rel. Ed. Office.**

# CONFIRMATION SERVICE HOURS

Name \_\_\_\_\_ Grade: \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Teacher \_\_\_\_\_

	Date	Hours Worked	Type of Service	Supervisor
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____

## COMPLETED SERVICE REFLECTION SHEET

Briefly, describe what it was like for you to do service?

How did this service enable you to respond to Jesus' invitation to love your neighbor and thereby build your own faith?

How can you continue to develop your faith once you are confirmed?

Signed \_\_\_\_\_

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