

St Francis of Assisi Parish 1815 S 8th Ave Yuma, AZ 85364 (928)782-1875

Donation Fee	e 1st Year \$75.00
	2nd Year \$75.00
() Paid	Date:
Baptismal Co	ertificate:
() Recv'd	Date:
First Commu	ınion Certificate:
() Recv'd	Date:

TEEN CONFIRMATION REGISTRATION 2025-2026

Registering for? 1st Year 2nd Year Candidate's name in full as it appears on their Baptismal Certificate: Name Candidate wishes to use during Confirmation Classes (If Different Classes) Address: City State Zip Cell Phone: Cell Phone: Cell Phone: Grade: Sex: Male Female School: Grade: Grade: Parent Email Address: Must have valid email address in order to be registered for the State State: Church: City & State: Church: City & State: Father's Full Name: Church: Church: City & State:	Date:	Date Received:			Received by:		
Name Candidate wishes to use during Confirmation Classes (If Different Address: City State Zip	Reg	istering for?	1st Year	_ 2nd Ye	ear		
Address: City State Zip	didate's name in	full as it appears	on their Bapt	ismal Ce	ertificate:		
Home Phone: Cell Phone: Date of Birth: Age: Sex: Male Female School: Grade: Grade: Parent Email Address: Must have valid email address in order to be registered for the S BAPTISM INFORMATION: Baptism Date: Church: City & State: Church: Cell Phone: Age: Sex: Male Female Grade: Grade: Age: Sex: Male Female Grade: Grade: Age: Sex: Male Female Grade:	e Candidate wisl	nes to use during	Confirmation	Classes	(If Different):		
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School: Grade: Grade: Grade: Grade: Must have valid email address in order to be registered for the S BAPTISM INFORMATION: Church: City & State:	e Phone:	City	Cell Phone:	=			
Parent Email Address: Must have valid email address in order to be registered for the S BAPTISM INFORMATION: Baptism Date: City & State:	of Birth:	Age:_	Sex:	Male	Female		
Must have valid email address in order to be registered for the S BAPTISM INFORMATION: Baptism Date: Church: City & State:	ol:				Grade:		
Must have valid email address in order to be registered for the S BAPTISM INFORMATION: Baptism Date: Church: City & State:	nt Email Address	s:					
Baptism Date: Church: City & State:		Must have va	alid email address in o	order to be re	egistered for the Sacrament		
City & State:	PTISM INFOR	MATION:					
	ism Date:	Chu	urch:				
Father's Full Name:	& State:	· · · · · · · · · · · · · · · · · · ·					
	er's Full Name:						
Mother's Full <u>Maiden</u> Name:							
FIRST HOLY COMMUNION INFORMATION:							
First Holy Communion Date:	Holy Communic	on Date:					
Church:	rch:				_		
City & State:							

NOTE: AN ORIGINAL COPY OF THE CANDIDATE'S BAPTISMAL CERTIFICATE AND FIRST HOLY COMMUNION CERTIFICATE IS REQUIRED WITH THIS FORM IN ORDER TO ENROLL.

Saint Francis of Assisi Parish Religious Education Department

Document Requirements Acknowledgement Form

To register to receive Sacraments for yourself or your child, there are certain requirements that must be met. The following is a list of required documents that must be provided to the St. Francis of Assisi Office of Religious Education prior to registration. The lists are based on the Sacraments you or your child will be receiving. Godparent/Sponsor information is listed further down on this form.

Youth First Holy Communion: A Certified Copy of the Child's Baptism Certificate
Teen Confirmation: A Certified Copy of the Teen's Baptism and First Holy Communion Certificate
RCIC - Rite of Christian Initiation for Children: A Certified Copy of the Child's Birth Certificate
Adult Confirmation: A Certified Copy of the Candidate's Baptism and First Holy Communion Certificate
OCIA-Order of Christian Initiation for Adults: A Certified Copy of the Catechumen's Birth Certificate
to be a Godparent or Sponsor for the Sacraments of Baptism and Confirmation, you must provide Certified Copy of your Confirmation Certificate, and if married, a Certified Copy of your Marriage Certificate by The Church. Sponsor Documents must be provided to the St. Francis of Assisi Office of Religious Education by October 16th or you/your child will not be able to continue in the acrament Preparation classes.
ly enrolling myself or my child in the Religious Education Program at Saint Francis of Assisi Parish understand I must provide the necessary documents as listed above within the timeline rovided.
igned Date
or parents registering their minor children: I/We give authorization for my/our child/children to participate in the Personal Safety ducation Program.
igned Date