



THE DIOCESE OF KALAMAZOO
Office of the Bishop

SACRAMENT OF CONFIRMATION

PARISH NAME _____

PASTOR/PARISH COORDINATOR _____
(SIGNATURE OF PASTOR OR PARISH COORDINATOR IS REQUIRED)

CONFIRMATION COORDINATOR _____

Telephone # _____

Circle one:

I would prefer a date in:

I would prefer a:

Time:

(Note: Given the relatively small number of weekends, this may not be possible.)

Would you like to bring your candidates to the Cathedral to receive their Sacrament?

(Diocesan Confirmations are scheduled for November 19, 2017 and April 29, 2018.)

Yes No

How many candidates will receive their Sacrament? _____

Will your candidates join with another Parish for Confirmation? If yes, which Parish?

The following dates **DO NOT** work for our parish because of other events already scheduled:

Additional information or comments:

Please digitally submit your request below.