Parish: ____________________________________________________________

Date: ___________________ Time: ________________________________

Confirmation Contact Name: __________________________________________

Phone: ___________________ Email: ________________________________

Confirmation Information:
A. Number of Confirmandi: ________  B. Confirmation Mass: □ A  □ B  □ C
   (See Roman Missal, pages 834-837)

Assisting Deacon(s): ________________________________________________

Where will the bishop vest? _________________________________________

Order of the Mass

Penitential Rite:
□ Confiteor  □ Simple Kyrie: ___Sung___ Recited  □ Kyrie with Petitions

Glory to God:
□ Sung  □ Recited  □ Omitted (Seasonal Consideration)

First Reading: __________________________
Second Reading: __________________________
Gospel: ________________________________

Will a collection be taken up during the Offertory?  □ No  □ Yes

If so, will the collection be included in the presentation of the gifts?  □ No  □ Yes

Will there be a Meditation Song after Communion? □ No  □ Yes

Remarks after Communion:  □ Pastor  □ Other _________________________

After the celebration will the bishop greet the people?  □ No  □ Yes

□ Outside the Church  □ Another location: ________________________________

Pictures: Where will pictures be taken? ________________________________

   In inclement weather? ____________________________________________


Please fax or email the completed form to Debbie Charles at (203)371-8323 or dcharles@diobpt.org