

# Immaculate Conception Parish

300 ANSLEY GROVE RD., WOODBRIDGE, ONTARIO L4L 3W4  
TELEPHONE: 905 856-2205 FAX: 905 850-5589 EMAIL: [icparish@rogers.com](mailto:icparish@rogers.com)

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August 12, 2024

Dear Parents and Guardians,

## **RE: 2025 Confirmation Registration**

Attached please find the 2025 Confirmation registration form. Grade 7 students wishing to receive the Sacrament of Confirmation must be registered at Immaculate Conception Parish. Registrations will **open on Monday August 12, 2024 and will close on Saturday September 21, 2024.**

To register your child, please fill in the attached registration form and **return it to the parish office during office hours** with a copy of your child's Baptismal certificate. A fee of **\$60** will be applied to cover the expenses (**cash or cheque only**). **Incomplete registrations will not be accepted.**

The complete preparation program will be released at the parent/candidate meeting which will be held on **Thursday October 17, 2024 at 7pm at Immaculate Conception Parish. Attendance at the meeting is mandatory.** If you are unable to attend the meeting, please contact me at your earliest convenience.

If you have any questions and/or concerns, please do not hesitate to contact the parish office.

Sincerely yours in Christ,

Fr Eugene Chianain, C.F.I.C.  
Pastor

## **2025 CONFIRMATION DATES**

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- Thursday April 24, 2025 at 7:00pm – St. John Bosco
- Friday April 25, 2025 at 7:00pm – St. Gabriel
- Thursday May 1, 2025 at 7:00pm – St. Catherine & Other Schools
- Friday May 2, 2025 at 7:00pm – Immaculate Conception

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## 2025 Confirmation Registration Form

*Please print clearly and return to the Immaculate Conception Parish office.*

Registration Date: \_\_\_\_\_

Fee: \$60 (cash or cheque only)

### I. CHILD'S INFORMATION

Full Legal Name as it Appears on the Official Birth Certificate

First Name	Middle Name	Last Name
Date of Birth: _____	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Date of Baptism: _____	Church of Baptism: _____	
Rite/Denomination: <input type="checkbox"/> Roman Catholic	<input type="checkbox"/> Other _____	
Address of the Church of Baptism: _____		
Has the child received First Holy Communion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>**Please note that a copy of the Baptismal Certificate is <u>required</u> at the time of registration**</b>		
Name of School: _____	Grade: _____	
Allergies/Special Needs: _____	Height (required for gown size): _____	
Child's Address: _____		
Street	City	Postal Code

### II. PARENT'S INFORMATION

#### Mother

First Name	Middle Name	Maiden Name
Religion: <input type="checkbox"/> Roman Catholic	<input type="checkbox"/> Other _____	<input type="checkbox"/> None
Address: _____		
Street	City	Postal Code
Phone Number: _____	Email: _____	

#### Father

First Name	Middle Name	Last Name
Religion: <input type="checkbox"/> Roman Catholic	<input type="checkbox"/> Other _____	<input type="checkbox"/> None
Address: <input type="checkbox"/> Same as mother's		
Street	City	Postal Code
Phone Number: _____	Email: _____	

**Media Release:** I consent to have photographs and video taken of my children during the ceremony for use in any form of media and/or any publicity material produced or printed by Immaculate Conception Parish.

\_\_\_\_\_  
Signature of Parent/Guardian

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## 2025 Sponsor Registration Form

*Please print clearly.*

*\*\*If the sponsor has not been selected at the time of registration,  
this sponsor registration form must be returned to the parish office no later than **January 31, 2025.**\*\**

Name of Candidate: \_\_\_\_\_

School: \_\_\_\_\_

### SPONSOR REGISTRATION FORM

The following are the requirements in order for a Catholic to be a sponsor (canon 874):

- At least 16 years of age
- He/She has been fully initiated in the Catholic Church (received Baptism, Holy Communion, and Confirmation)
- In good standing with the Church (e.g. has not married outside of the Catholic Church)
- Not the father or mother of the one to be confirmed

#### Sponsor's information:

Full legal name

\_\_\_\_\_

First Name

Middle Name

Last Name

Current Parish: \_\_\_\_\_ City: \_\_\_\_\_

Sponsor's Address: \_\_\_\_\_  
Street City Postal Code

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Confirmation: \_\_\_\_\_

Church of Confirmation: \_\_\_\_\_ City: \_\_\_\_\_

Fulfills the requirements of canon 874

***\*\*Please note that a copy of the Sponsor's Confirmation Certificate is requested to accompany  
this registration form\*\****

\_\_\_\_\_  
Signature of Parent/Guardian