

Immaculate Conception Parish

300 ANSLEY GROVE RD., WOODBRIDGE, ONTARIO L4L 3W4

TELEPHONE: 905 856-2205

FAX: 905 850-5589

EMAIL: icparish@rogers.com

August 25, 2025

Dear Parents and Guardians,

RE: 2026 Confirmation Registration

Attached please find the 2026 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 25, 2025**.

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 meeting which will be held in October. **Attendance at the meeting is mandatory.**

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

Sincerely yours in Christ,

Fr Shaiju Ponmalakunnel, C.F.I.C.
Administrator

2026 CONFIRMATION DATES

- Thursday April 16, 2026 at 7:00pm – Immaculate Conception
- Friday April 17, 2026 at 7:00pm – St. John Bosco
- Thursday April 23, 2026 at 7:00pm – St. Gabriel
- Friday April 24, 2026 at 7:00pm – St. Catherine & Others

Immaculate Conception Parish

300 ANSLEY GROVE RD., WOODBRIDGE, ONTARIO L4L 3W4

TELEPHONE: 905 856-2205

FAX: 905 850-5589

EMAIL: icparish@rogers.com

2026 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		
Please note that a copy of the Baptismal Certificate is <u>required</u> at the time of registration		
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 _____

To be completed by the office staff: Sponsor Form: _____ Confirmation Date: _____

Immaculate Conception Parish

300 ANSLEY GROVE RD., WOODBRIDGE, ONTARIO L4L 3W4

TELEPHONE: 905 856-2205 FAX: 905 850-5589 EMAIL: icparish@rogers.com

2026 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, 2026.*****

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