

## Confirmation Questionnaire

Please complete and return this questionnaire along with the Confirmation Liturgy Planning Guide (also attached) to the Bishop Conlon's Office no later than three weeks prior to Confirmation.

Email: [jgrzadzinski@dioceseofjoliet.org](mailto:jgrzadzinski@dioceseofjoliet.org) Fax: 815-722-6632

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

Pastor: \_\_\_\_\_ Parochial Vicar: \_\_\_\_\_

Deacon: \_\_\_\_\_

DRE: \_\_\_\_\_ Principal: \_\_\_\_\_

### Date of Confirmation

*(If you are having multiple Confirmations, two lines are provided below)*

Day of the week: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Day of the week: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location (if other than parish church) \_\_\_\_\_

### Confirmandi

# of Confirmandi:

Total: \_\_\_\_\_

# from school: \_\_\_\_\_

# from R.E. \_\_\_\_\_

Age Group: \_\_\_\_\_

### Confirmation Dinner

If there is a Dinner:

Time: \_\_\_\_\_ Place: \_\_\_\_\_

### Location of Reserved Parking for Bishop

\_\_\_\_\_