

**Confirmation Planning Sheet
2015-2016**

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: _____

Will there be a meal either before or after the celebration? No Yes

If so, at what time? _____

Where will the meal take place? _____

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