Saint Kateri Tekakwitha
CATHOLIC CHURCH

Confirmation Preparation Handbook Acknowledgement

St. Kateri Tekakwitha Catholic Church
Catechetical Year: 2025–2026

Teen's Full Name: _____

Program: ☐ Confirmation Year 1 ☐ Confirmation Year 2

Parent/Guardian Name(s): _____

Email: _____ **Cell Phone:** _____

I acknowledge that:

- I received the **Confirmation Preparation Handbook (2025–2026)** and understand it outlines our parish's **expectations**, schedule, communication practices, and safety policies.
- I will review the handbook with my teen and help them follow the program expectations, including attending sessions, retreats, and service as outlined.
- I understand that **Sunday Mass with the group is considered part of the session** when indicated on the calendar, and that make-up expectations are described in the handbook.
- I will provide any required **sacramental records** (e.g., Baptism certificate) and forms by the stated deadlines.
- I will communicate promptly with the Confirmation team if my teen must miss a session or **needs support**.

Parent/Guardian Signature: _____ **Date:** _____

Parent/Guardian Printed Name: _____