

Confirmation Saint Name

TEAM# _____

St. Mary of the Immaculate Conception Catholic Church

1009 Stafford Avenue ♦ Fredericksburg, Virginia 22401

Office of Youth Ministry- 540 373-1926 ♦ Religious Education Office 540-373-7770

NAME: _____ CATECHIST'S NAME: _____
(Religion Teacher)

This form is designed to assist you in your spiritual formation prior to Confirmation. Your chosen Patron Saint should be one to whom you can relate and aspire to model. Please write neatly and in complete sentences.

SAINT'S NAME _____

SAINT'S FEAST DAY _____

BORN _____ DIED _____

WHERE LIVED _____ OCCUPATION _____

HOW DID THIS SAINT DIE? _____

QUALITIES OF THIS SAINT WHICH I ADMIRE MOST: _____

THIS SAINT IS IMPORTANT TO ME AND MY LIFE BECAUSE: _____

THIS SAINT IS IMPORTANT TO THE CHURCH BECAUSE: _____

RESOURCE(S) USED: _____

THIS FORM MUST BE TURNED IN TO THE OFFICE OF YOUTH MINISTRY BY THE WEEK OF
FEBRUARY 1, 2011