



Memo

Date: January 9, 2018
To: Pastors, Deacons, Directors of Religious Education and Secretaries
From: Mardessa Smith, Sr. Executive Assistant, Archbishop's Office
Re: Fall 2018 Confirmations

The scheduling of Confirmations taking place between **August 2018 and December 2018** has begun. Please complete and submit the attached request form by mail or email (one submission only). If you choose to submit the request form by email, be sure to attach the completed form to the email.

Please note that the request forms are handled on a first come first serve basis on Archbishop Gregory and Bishop Shlesinger's calendar. Parishes will be notified via email with a letter confirming the date, time and respective bishop no later than February 1, 2018. If you have any questions about scheduling a Confirmation, please call (404) 920-7303 or email mwsmith@archatl.com.

Points To Consider:

- Fridays, Saturdays and Sundays are the most requested days for Confirmation. For parishes located within the perimeter, please choose a weeknight for your Confirmation if possible.
- The bishops are not available on the following dates in 2018:
 - August 20 – August 22
 - September 10 – September 13
 - November 10 – November 15
- If the number of Confirmation candidates is fewer than ten, consider joining with a neighboring parish or celebrate the Sacrament of Confirmation every two years. If the number of candidates is larger than 80, please consider having two liturgies.

REQUEST FOR CONFIRMATION ARCHDIOCESE OF ATLANTA

NAME OF PARISH: _____ Phone # _____
[PLEASE PRINT]

ADDRESS: _____

1ST PREFERENCE _____
Month and Date Year Day of the Week Time

2ND PREFERENCE _____
Month and Date Year Day of the Week Time

3RD PREFERENCE _____
Month and Date Year Day of the Week Time

LUNCH/OR
DINNER: Yes ___ Time _____ No ___ PARISH RECEPTION: Yes ___ No ___

APPROXIMATE NUMBER OF CANDIDATES _____ APPROXIMATE AGE OF CANDIDATES _____

PLEASE INDICATE IF A LANGUAGE OTHER THAN ENGLISH IS NECESSARY FOR THE LITURGY: _____

CONTACT PERSON: _____ EMAIL: _____

NOTE: ONLY INCLUDE CONTACT PERSON RESPONSIBLE FOR EVENT.

DATE _____

[PLEASE PRINT]

PLEASE COMPLETE THIS CONFIRMATION REQUEST AND RETURN TO

Mardessa Smith
2401 Lake Park Drive
Smyrna, GA 30080-8862
or
CONFIRM@ARCHATL.COM