



ST. JULIA PARISH  
WESTON AND LINCOLN  
**CHOICE FORM**

ST. JULIA PARISH

CONFIRMATION PROGRAM

2007-2008

Candidate's Name \_\_\_\_\_

Candidates' E-Mail \_\_\_\_\_

Address \_\_\_\_\_

Family's E-Mail \_\_\_\_\_

Address \_\_\_\_\_

**DURING THE SCHOOL YEAR AHEAD, I INTEND TO TAKE PART IN THE FOLLOWING MASS WORKSHOP and/or MINI-COURSES (ON PAGES 4-5).**

(List as many as you think will work best to you, to meet your goal of receiving Confirmation in two years, or perhaps more quickly or more slowly.)

**TITLE:**  
**DATES:**

**TITLE:**  
**DATES:**

**TITLE:**  
**DATES:**

**TITLE:**  
**DATES:**

**DURING THE SCHOOL YEAR AHEAD, I INTEND TO TAKE PART IN THE FOLLOWING SINGLE SESSIONS (ON PAGE 6). (Use as many as you plan to attend.)**

**TITLE:**  
**DATE:**

**TITLE:**  
**DATE:**

**TITLE:**  
**DATE:**

**TITLE:**  
**DATE:**

**TITLE:**  
**DATE:**

**TITLE:**  
**DATE:**

**PARENT'S MEETING IN THE YEAR AHEAD: (CIRCLE ONE; SEE PAGE 1)**

JAN. 13

MARCH 30

STAFF VISIT

NEXT YEAR

Once you and your mentor have spoken about your choices for the year,  
**PLEASE RETURN THIS CHOICE FORM *BEFORE OCT. 18* TO**

**St. Julia Parish Religious Education  
374 Boston Post Road  
Weston, Ma. 02493**

**Changes can later be made, in consultation with your assigned mentor.**