2023 CONFIRMATION/FIRST COMMUNION MASS SCHEDULING FORM

(Submit one form per Parish/Location)

| Parish/locatio | on Name: | | | | |
|---------------------|---------------------------------------|--|------------------|-----------------------|----------------------|
| SCHE | DULED DATES FOR Y | OUR CONFII | RMATION/FIRST (| COMMUNION MAS | S(ES): |
| # of Masses | Date of M | ass Time | | Language | |
| 1 | | | | □ English □ □ Spanish | Bilingual □ Other |
| 2 | | | | ☐ English ☐ ☐ Spanish | Bilingual Other |
| 3 | | | | □ English □ □ Spanish | Bilingual ☐ Other |
| 4 | | | | □ English □ □ Spanish | Bilingual □ Other |
| 5 | | | | ☐ English ☐ ☐ Spanish | Bilingual Other |
| 6 | | | | ☐ English ☐ ☐ Spanish | Bilingual Other |
| (I Name of Paris | If you are scheduling | g more than | 6 Masses, please | use another shee | <i>t</i>) |
| Telephone Nu | ımber: | | | | |
| Email Addres | | | | | |
| | Mail form to: | Office of the Archbishop Attn. Christina Buches 1300 South Steele Street Denver, CO 80210 | | | |
| | Or email form to: Questions? Call: | office.archbishop@archden.org Christina Buches (303) 715-3100 Fr. Tom Scherer (303) 715-3210 | | | |

PLEASE RETURN THIS FORM BY **FRIDAY**, **SEPTEMBER 2**ND, **2022**