



**St. Clare Catholic Church**  
**Quinceañera Form**  
 (PLEASE PRINT ALL INFORMATION)

<b>OFFICE USE ONLY</b>
Date received _____
Initials _____
Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>
Initials _____

*St. Clare Catholic Church is excited to share in this special event with you.  
 Quinceañera requirements are as follows: (1) Family registered in the parish*

*(2) Child has received Baptism, Holy Communion, & Confirmation or enrolled in Confirmation*

**Families Information:**

Today's Date: \_\_\_\_\_ Proposed Date of Quinceañera: \_\_\_\_\_

Parents First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Parish Information:**

Are you a registered parishioner?  St. Clare  No  Other \_\_\_\_\_

What is your involvement in the life of the parish: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Daughter's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Has your daughter received the following Sacraments of Initiation?

Baptism  Holy Communion  Confirmation or enrolled in Year Two of Confirmation Preparation

*Please provide original certificates for us to copy*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*St. Clare Office Notes:* \_\_\_\_\_

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