

**St. Patrick Church**  
**1114 Willow Street**  
**San Antonio, TX 78208**  
**Phone: (210)226-5223**

PARENT NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE No: \_\_\_\_\_  
MASS DATE: \_\_\_\_\_ TIME: \_\_\_\_\_  
CANDIDATE: \_\_\_\_\_

***Guidelines for a Liturgical Celebration for Fifteenth /Sixteenth Birthday***

- 1. The candidate must fill the Quinceañera Registration Form, available in the parish office.*
- 2. The candidate must have at least the sacrament of Holy Communion in order to have a Mass.*
- 3. A rehearsal of one hour will be scheduled on the week prior to or the week of the celebration.*
- 4. Mass donation is \$450, which covers the expenses of the church utilities and upkeep. Should you choose a different priest, his honorarium is a separate fee apart from the \$450.*

***Guía para la celebración Eucarística de Quinceañeras***

- A. La candidata debe llenar un formulario de registraci3n disponible en la oficina de la parroquia.*
- B. La candidata debe tener el sacramento de la Santa Comuni3n para tener una Misa.*
- C. Un ensayo, de una hora para la celebraci3n de misa se har3 la semana antes o la misma semana de la celebraci3n.*
- D. La donaci3n de la misa de Quince Años es \$450, esto cubre los gastos de las utilidades y mantenimiento de la iglesia. Si elige a otro padre oficiante, la donaci3n para 3l es aparte de los \$450.*

**DEPOSIT \$150 due at signing this form, \*non-refundable if quinceañera is cancelled.**

**Full amount is payable at least 30 days prior to scheduled date of occupancy or reservation will be cancelled.**

<b>DATE</b>	<b>AMOUNT:CASH/Credit Card</b>	<b>RECEIPT NUMBER</b>

**(Check is not accepted)**

**For Payment using a Credit Card, 3.5% transaction fee is applied/added, thank you**

I have read this contract and fully understand the provisions and rules, and I agree to these conditions. \_\_\_\_\_

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**San Antonio, TX 78208**  
**Phone: (210)226 5223**  
**Email: stpatrickwillow@hotmail.com**

**Quinceañera Registration Form**

Name: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Parents or Guardians: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Telephone: (     ) \_\_\_\_\_

Are you a member of St. Patrick? \_\_\_\_ YES \_\_\_\_ NO

**Sacraments:**

1) **Baptism:** \_\_\_\_ YES \_\_\_\_ NO

If YES Date \_\_\_\_\_

Where \_\_\_\_\_

Name of Church

\_\_\_\_\_  
Address, City, State & Zip Code

2) **First Eucharist:** \_\_\_\_ YES \_\_\_\_ NO

3) **Confirmation:** \_\_\_\_ YES \_\_\_\_ NO

4) Are you currently attending Religious Education classes? \_\_\_\_ YES \_\_\_\_ NO

If no, when was the last time attended? \_\_\_\_\_ (Month, Year)

5) Do you attend weekend Mass regularly? \_\_\_\_ YES \_\_\_\_ NO

Application approved \_\_\_\_\_

Application declined \_\_\_\_\_