

Church of Our Lady of Mercy

2600 Shasta View Drive, Redding, California 96002

(530) 222-3424 or FAX (530) 221-5717

Quinceañera Celebration

Father's Name/*Nombre del Padre*: _____

Mother's Name/*Nombre de la Madre*: _____

Quinceañera's Name/*Nombre*: _____

Address/*Domicilio*: _____

Phone/*Teléfono*: _____ or/o _____

Birth date/*Fecha de Nacimiento*: _____

Parish/*Parroquia*: _____

How often do you attend Mass?/*¿Cada cuando asistes a Misa?* _____

Where do you attend school?/*¿Dónde estudias?* _____

How are your grades?/*¿Cómo son tus calificaciones?* _____

Have you been baptized?/*¿Has sido Bautizada?* _____ Where/*¿Dónde?* _____

Have you received First Communion?/*¿Has recibido la Primera Comunión?* _____

When & Where?/*¿Cuándo y Dónde ?* _____

Are you confirmed?/*¿Te han Confirmado?* _____ If no, are you enrolled in the Confirmation program?/*Si no, ¿participes en un programa?* _____

Are you involved in the Youth Ministry Program?/*Participes en el Programa de Jóvenes?* _____

Where?/*¿Dónde?* _____

Personally, what does having a Quinceañera mean for you?/Personalmente, qué significa celebrar una Quinceañera para ti? _____

Would you like a Mass or Liturgical Service or Blessing within Mass?/ Desean tener una Misa, un Servicio Liturgico ó una Bendición entre la Misa? _____

Do you want the celebration to be in English or Spanish?/Desean que la celebración sea en inglés o español? _____

What date have you chosen?/ ¿Qué fecha han escogido? _____

Please circle the time of day: Saturday, 12 noon or 2:00 p.m. or Sunday, during 1:00 p.m. Mass. Encierre porfavor con un circulo: sábado a las 12md o a las 2:00pm o el domingo durante la Misa a la 1:00p.m.

Will you have a Court of Honor?/¿Tendrán chambelan y damas de honor? _____

How many?/¿Cuántos? _____ Have you chosen Readers/Lectors?/¿Han escogido los Lectores? _____

Will you have music?/¿Habrà música? _____

Will you have a Photographer/Video?/ ¿Habrà Fotógrafo/Video? _____

Confession/¿Reconciliación? _____

Rehearsal/Ensayo _____

Name of Priest/Deacon celebrating this Mass/Nombre del Sacerdote o Diácono que celebrará esta Misa: _____

Additional Comments/ Comentario Adicional: _____

A \$100 deposit is required to secure the date and time. Se requiere un deposito de \$100 para fijar y asegurar la fecha y hora.

Suggested donation to the Church: \$300.00 Amount received \$ _____

Signature of Applicant Date

Information received by: _____ Date _____

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Quinceañera Mass Reservation

Name of Quinceañera/*Nombre de la Quinceañera*: _____

Parents Names/*Nombre de sus Padres*: _____

Address/*Domicilio* _____

Telephone Number/*Número de teléfono*: _____

Cell #/*Celular* _____

Date/Hour of Mass/*Fecha y Hora de la Misa*: _____

Donation Amount/ *Donativo*: _____ Received by/*Recibido por*: _____