

2024-25 CONFIRMATION REGISTRATION

"If you confess with your mouth that Jesus is Lord and believe in your heart that God raised him from the dead, you will be saved"
-Romans 10:9

CONFIRMAND'S FULL NAME: _____

GRADE: _____

SCHOOL: _____

BIRTHDAY: _____

BAPTIZED (please circle): YES NO

PARENTS/GUARDIANS: _____

ADDRESS: _____

HOME PHONE: _____

CELL PHONE #1: _____

(There will communications via text)

NAME: _____

CELL PHONE #2: _____

NAME: _____

EMAIL #1: _____

NAME: _____

EMAIL #2: _____

NAME: _____

IS ANYTHING ELSE WE NEED TO KNOW ABOUT YOUR CHILD?

