

# Confirmation Registration 2021

Name \_\_\_\_\_

Grade \_\_\_\_\_

Gender \_\_\_\_\_

Parent 1 \_\_\_\_\_

Parent 2 \_\_\_\_\_

Address \_\_\_\_\_

Student Cell \_\_\_\_\_

Parent 1 Cell \_\_\_\_\_

Parent 2 Cell \_\_\_\_\_

Baptized? Yes / No

Extra-Curriculars (please list all):

Does your child have any learning disorders or difficulties that would affect their ability to engage the confirmation program?

Is there anything else the pastor needs to be aware of while working with your child?