

DATE \_\_\_\_\_

Amount Paid \_\_\_\_\_

Balance Due \_\_\_\_\_

Cash \_\_\_\_\_

Check # \_\_\_\_\_ Initials \_\_\_\_\_

**St. Patrick - St. Anthony Church**

**Religious Education Office**

**756-4034 x116**

**Confirmation Candidate Registration Form**

**2019-2020**

**Please PRINT Clearly!**

**LAST NAME OF STUDENTS:** \_\_\_\_\_

**PARENTAL/GUARDIAN INFORMATION**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_  
Number \_\_\_\_\_ Street \_\_\_\_\_ Town/City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ e-mail \_\_\_\_\_

**IMPORTANT - MANDATORY information:**

**Phone and Name in case of emergency:** \_\_\_\_\_

**1ST STUDENT INFORMATION**

Name \_\_\_\_\_ School Grade this Sept: \_\_\_\_\_  
First Last

Date of Birth \_\_\_\_\_

**Were Sacraments Received? Where?**

Baptism Yes No this parish or Name/Location of other Church \_\_\_\_\_

Penance Yes No this parish or Name/Location of other Church \_\_\_\_\_

Eucharist Yes No this parish or Name/Location of other Church \_\_\_\_\_

Confirmation Yes No this parish or Name/Location of other Church \_\_\_\_\_

**Special Considerations:** Please be as specific as you can. (e.g. learning disability, special needs, medical info., food allergies, etc.) This confidential information will be limited to teacher and administrators. \_\_\_\_\_

**2ND STUDENT INFORMATION**

Name \_\_\_\_\_ School Grade-this Sept: \_\_\_\_\_  
First Last

Date of Birth \_\_\_\_\_

**Were Sacraments Received? Where?**

Baptism Yes No this parish or Name/Location of other Church \_\_\_\_\_

Penance Yes No this parish or Name/Location of other Church \_\_\_\_\_

Eucharist Yes No this parish or Name/Location of other Church \_\_\_\_\_

Confirmation Yes No this parish or Name/Location of other Church \_\_\_\_\_

**Special Considerations:** Please be as specific as you can. (e.g. learning disability, special needs, medical info., food allergies, etc.) This confidential information will be limited to teacher and administrators. \_\_\_\_\_

Please attach additional forms for more children if necessary.  
All programs meet in the Franciscan Center for Urban Ministry.  
The tuition/materials fee is \$55.00 per child with a maximum family fee of \$200.00.  
Please make checks payable to St. Patrick-St. Anthony Church.  
Turn over for Programs and session options.

## Confirmation Program

This program is for confirmation candidates in any two years of High School (typically freshman and sophomore) and culminates with the reception of the Sacrament in spring of the second year. Classes are typically on Sunday mornings, with required outreach ministry activities at various days and times.

Students Names:

Confirmation I

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Confirmation II

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**Photographic and/or Video Recording devices may be used at any church event/Mass or during any class session and could be used for publicity or historical purposes in a print or web based media outlet (i.e. church website or Facebook). In order to protect the privacy of the children and youth attending event/Mass/classes, parents/legal guardians are asked to select the appropriate permission level below. (Please check the one which applies)**

- I grant permission to use photos of my child/children, with name, on church website & social media.**
- I grant permission to use photos of my child/children, w/o name, on church website & social media.**
- I DO NOT give permission to use photos of my child/children.**

Please add additional information below: