



Confirmation

Registration Form 2024-2025

STUDENT'S NAME: _____

STUDENT'S GRADE: _____

PARENT NAME(S): _____

PARENT EMAIL: _____

HOME PARISH: _____

CITY/TOWN

DATE & PLACE OF BAPTISM:

DATE & PLACE OF FIRST COMMUNION:

PARENT SIGNATURE:

DATE

Please provide copies of your child's records of Baptism & First Holy Communion along with this form.