



REGISTRATION

Office Use Only
 Amount Due \$ _____
 Amount Pd \$ _____
 Date Pd _____
 CASH/Check No. _____

Student info:

Full Name: _____

First

Middle

Last

Address: _____

School/grade _____ / _____ DOB: _____ Place of birth: _____

Parent E-mail address (es): _____

Phone (H) _____ (C) _____

Does your child have any health/learning problems? Yes No If yes, please describe the problem(s) we need to be aware of:

	Date	Church	Church Address
***Baptism			
First Eucharist (Communion)			
Reconciliation (Confession)			

***** Please supply us a copy of your child's baptismal certificate.**

Parent/guardian info:

Father's Name: _____ Mother's First and **maiden name:** _____ Does candidate live with both custodial parents? _____ (if not, are there any concerns we need to know?): _____

Have you registered at St. Lawrence Parish? Yes No

Program Fees

\$25 (Fee covers books and materials). There will be an additional charge to be determined later for the Confirmation retreat.

You may drop it off at the office or put in the collection basket in an envelope labeled "Confirmation". Class schedule to be determined and sent to registered students.

Call Donn and Michelle at 537-0019 or e-mail at paquette5@comcast.net with any questions.