



CONFIRMATION REGISTRATION FORM
GOOD SHEPHERD RC CHURCH

Payment Due on/or before July 31st,
(Registration received after July 31st will receive a \$25 late fee)

Please Print Clearly

Candidate Information

Last Name: _____ First Name: _____ Middle Name: _____ M/F: _____

Date of Birth: _____ High School: _____ Grade: _____

Faith Formation - Last Grade Completed: _____ Email: _____

Cell (used only for Flocknote text messages about snow days, class cancelations, etc.): _____

Special needs (allergies/medical conditions, learning disabilities, etc.). Please be specific.

Family Information

Family Name: _____ Mother's Maiden Name: _____

Father's Name: _____ Mother's Name: _____

Email: _____ Email: _____

Address: _____

Home Phone: _____ Primary Cell: _____

Emergency Contact Information

Name: _____ Phone: _____ Relation: _____

I would like to receive Flocknote text messages
about snow days, class cancelations, etc. to my cell phone number: _____

Tuition Fees:

1 Child \$150: _____

2 Children \$250: _____

3 Children \$375: _____

Payment Information

Nonrefundable tuition payment for the **two-year**
Confirmation Program is expected at time of registration.
Families with financial difficulties are encouraged to
contact Fr. Tim.

T-Shirt Size:

- Small
- Medium
- Large
- X-Large

Photo Release: I give my permission for my child/ren to be photographed during class times and other program events.
I understand that these images may be used and display inside church property and/or posted on the parish website, bulletin,
Facebook and/or may be submitted to local newspapers.

Parent Signature: _____ Date: _____

Sacramental History:

Date of Baptism: _____ Parish: _____ City, State: _____

Parent Volunteer Opportunities:

- Catechist
- Co-Catechist (fee waived)
- Occasional Assistance
- Snacks

Name: _____ Phone: _____ Email: _____