

**CONFIRMATION REGISTRATION FORM**  
**FRESHMEN {1<sup>st</sup> Year Candidates}**

**PLEASE PRINT**

LAST NAME: \_\_\_\_\_ FIRST NAME : \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ EMERGENCY PHONE: \_\_\_\_\_

Emergency Phone Description (ex. Mom's Cell Phone) \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_ GENDER:     MALE     FEMALE

HIGH SCHOOL: \_\_\_\_\_ T-SHIRT Size - S - M - L - XL - XXL

STUDENT CELL PHONE: \_\_\_\_\_

STUDENT EMAIL ADDRESS \_\_\_\_\_

(Student cell phone & email will only be used for communicating Confirmation & Youth Ministry events/activities)

PLEASE CIRCLE ALL COMPLETED GRADES OF RELIGIOUS EDUCATION  
1 2 3 4 5 6 7 8 OR CIRCLE - ALL

ALLERGIES (including DRUG OR FOOD) \_\_\_\_\_

SPECIAL NEEDS: \_\_\_\_\_

SPECIAL MEDICATION OR OTHER PERTINENT MEDICAL INFO: \_\_\_\_\_

DATE OF BAPTISM: \_\_\_\_\_ (Church/Town/State) \_\_\_\_\_

DATE OF EUCHARIST: \_\_\_\_\_ (Church/Town/State) \_\_\_\_\_

MOTHER'S FIRST & LAST NAME: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

FATHER'S FIRST & LAST NAME: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

PARENT EMAIL\*: 

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*\*For Confirmation Correspondence Information*

PARENT EMAIL 2: 

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PLEASE NOTE ANY SPECIAL GUARDIANSHIP INFORMATION: \_\_\_\_\_

I hereby grant my permission for OLM Youth Ministry to use and publish photographs, video and/or sound recordings made of my teen by OLM Youth Ministry, and I hereby release OLM Youth Ministry from any and all liability from such use and publication. \_\_\_\_\_.

(please initial)

FOR OFFICE USE ONLY

DATE REC'D : \_\_\_\_\_

CHECK NUMBER: \_\_\_\_\_ \$ AMOUNT : \_\_\_\_\_

NOTES: