

Confirmation Preparation Registration Form 2019 - 2020

(The cost for Confirmation for the 2019-2020 year is \$135.00, after Aug. 30th, \$20 late fee.)

STUDENT INFORMATION

Student's Full Name (as it appears on Birth Certificate) _____ Date of Birth _____

School Attending _____ Student's Grade (2019-20 School Year) _____

So that we can best serve your child, please list any known conditions that we should be made aware of (i.e. **Learning Disabilities, Allergies, Dietary Restrictions, Medications taken, Medical, Physical, Emotional, Behavioral, etc.**)

PARENT INFORMATION

Father's Full Name (as it appears on **FATHER'S** Birth Certificate)

Home Address

City _____ Zip _____ Email _____

• _____
Father's Cell Phone # _____ Father's Work Phone # _____

Mother's Full Name (as it appears on **MOTHER'S** Birth Certificate)

• _____
Mother's Cell Phone # _____ Mother's Work Phone # _____

Home Address

City _____ Zip _____ Email _____

(If Divorced) Legal Custody Mother Father Joint N/A

EMERGENCY CONTACT INFORMATION

_____		_____
Emergency Contact (First & Last)		Relation to Parents
_____	_____	_____
Cell Phone #	Home Phone #	Work Phone #

STUDENT SACRAMENTAL INFORMATION

Name of Church of Baptism

Street Address

_____	_____	_____	_____
City	State	Zip	Country

_____	_____
Church of Baptism Phone #	Church of Baptism Fax #

Name of Church of First Holy Communion

Street Address

_____	_____	_____	_____
City	State	Zip	Country

_____	_____
Church of First Holy Communion Phone #	Church of First Holy Communion Fax #

Student's Age/Grade

ACTIVITY RELEASE AND MEDICAL TREATMENT WAIVER

We, the parent(s)/legal guardian(s) do hereby give our permission for our child to attend Confirmation Preparation classes and to be treated for a medical emergency in our absence while participating in the program. The adult supervisor may act as an agent in our absence. In case of accident, we do not hold the Diocese of Palm Beach, St. Anastasia Catholic Church, its staff, or the adult/teen catechists/chaperones responsible for accident or injury. We understand that all cost incurred will be our (parent or legal guardian) responsibility. We also understand that if our child breaks any of the program rules, the proper authorities will be contacted and we (the parent or legal guardian) will be notified of all actions taken and/or to immediately to pick up our child from the premises.

Father/Legal Guardian Printed Name

Father/Legal Guardian Signature

Date

Mother/Legal Guardian Printed Name

Mother/Legal Guardian Signature

Date

SPONSOR INFORMATION

Name of Sponsor

Street Address

City

State

Zip

Country

Phone #

Email

I _____, understand that it is my responsibility to contact my child's sponsor and have him/her complete the Sponsor Form on the St. Anastasia Church Website. All Sponsor Forms must be turned in on or before October 4, 2019.