

Confirmation Registration



Candidate's Information:

First Name	Preferred/Nick Name	Middle Name	Last Name
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Primary Address: _____

Primary Phone: _____ Gender: Male Female

Candidate's Cell Phone: _____

Candidate's E-mail: _____

School: _____ Grade: _____

Parish of Current Membership: _____

Birth and Baptism Information:

Date of Birth: _____ City and State of Birth: _____

Parish of Baptism: _____ Date of Baptism: _____

Baptism Parish City and State: _____

***** If the parish of Baptism is NOT St. Anne Parish you MUST include a copy of your Baptismal Certificate or Verification Form from the parish office of Baptism *****

Mother's Information:

(First Name)	(Middle Name)	(Maiden Name)	(Last Name)
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Mother's Cell Phone: _____

Mother's Email: _____

Father's Information:

(First Name)	(Middle Name)	(Last Name)
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Father's Cell Phone: _____

Father's Email: _____

OFFICE USE ONLY Total Fees: _____

Payment date: _____ Amt. Pd: _____ Ck#: _____ Balance: _____