

Corpus Christi Parish Community
REGISTRATION FOR CONFIRMATION PREPARATION 2008-2009

Name of Candidate				
Last	First	Middle	Nickname	
Gender	Grade in Sep '08	Date of Birth (mm-dd-yyyy)	High School Attending in 2008	
<input type="checkbox"/> Male	<input type="checkbox"/> 9th <input type="checkbox"/> 10th			
<input type="checkbox"/> Female	<input type="checkbox"/> 11th <input type="checkbox"/> 12th			
Family Information				
Street Address		City	State	ZIP Code
Home Telephone		Email Address (Primary Contact for Confirmation Updates)		
Mother				
First Name		Last Name	Maiden Name	Religion
Cell Phone		Work Phone	Email Address	
Father				
First Name		Last Name		Religion
Cell Phone		Work Phone	Email Address	
Medical Information				
Emergency Contact		Relationship	Telephone No.	Cell Phone
Condition (chronic conditions or illnesses e.g. epilepsy, diabetes, food allergies)				
Regular Medication				
Special Instructions				
Sacrament/Religious Education Information				
Date of Baptism		Church of Baptism	City/ State	Roman Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of 1st Communion		Church of 1st Communion	City/State	
Last Grade of Religious Education		Home Parish		
Other Activities				
Extracurricular Activities (e.g. sports, service/philanthropic organizations, clubs, arts, hobbies)			I grant Corpus Christi the right to photograph my dependent and use the photo for Corpus Christi publication purposes only. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Fees: Covers books and supplies for primary sessions and medals for rituals. Please check with Coordinator for Out-Of-Parish Fees.				
<input type="checkbox"/> One child \$130		<input type="checkbox"/> I need financial assistance.		
<input type="checkbox"/> Two children \$200				
Parent/Guardian Signature				
Signature				Date