

2017-2018 CONFIRMATION CLASS
REGISTRATION FORM
(Please fill out this form in its entirety)

Name of Confirmand as would appear on the Confirmation Certificate:

Name Child is Known By: _____

Address: _____

Date of birth: _____ Place of birth: _____

Gender _____ School: _____

Grade: _____

Date of baptism: _____

Place of baptism (name of church, denomination, city, state) _____

Other denominations with which your family has been affiliated: _____

E-mail address (Most confirmation materials will be sent via e-mail. Please list all e-mails you would like this information sent to.): _____

Please provide contact information for two adults able to act as Guardian for this child:

Adult: Name and Relationship to Child: _____

Address (Home): _____

Phone (Home): _____

Phone (Cell): _____

What is your hope for your child as s/he participates in Confirmation Class?

Adult: Name and Relationship to Child: _____

Address (Home): _____

Phone (Home): _____

Phone (Cell): _____

What is your hope for your child as s/he participates in Confirmation Class?

Is there anything else that you would like us to know about your child (e.g. allergies, physical/learning disabilities)?

Photos from confirmation events are sometimes use in the church newsletter, on bulletin boards and on the church website.

Please return to Mary McCarthy, dce@ccrye.org, Christ's Church, Rectory Street, Rye, NY 10580