

Confirmation Class Registration Form

STUDENT INFORMATION

Student's Full Name (**for our Confirmation Certificate**) Date of Birth

Student's Email Student's Cell Phone #

Has this student been baptized? Yes No If yes,

Name of Church (City, State) Date (approximate)

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.**). Please use the back if necessary.

PARENT INFORMATION

Parent #1 Name

Home Address Home Phone #

City, State Zip Email

• _____
Cell Phone # Work Phone #

Parent #2 Name

• _____
Cell Phone # Work Phone #

Home Address (if different) Home Phone # (if different)

City, State Zip Email

Complete and return to Lauren Yeh (lauren.yeh@nassauchurch.org) by email or in the church office.