VISITATION OF OUR LADY *C*onfraternity of *C*hristian *D*octrine

Confirmation Registration Form 2009-2010

CHILD'S NAME:_____ BIRTH DATE: ___/___/___ SEX: M F
Last **First** **Middle**

CHILD'S HOME ADDRESS: _____

CITY/STATE:_____ **ZIP**:_____ **PHONE(S)**:_____

EMAIL ADDRESS: _____

11th Grade - Catholic High School Attending: _____

PLEASE WRITE THE BEST PHONE NUMBER TO LEAVE YOU IMPORTANT MESSAGES FROM THE CHURCH REGARDING CONFIRMATION.

(_____) _____
Area Code

Student's Height: _____

CHILD RESIDES WITH: _____ Parents / Guardian:_____

CHILD'S SACRAMENTAL INFORMATION ** *See Special Notation section below.***

Church of Baptism: _____ City/State_____
Church of First Communion: _____ City/State_____

The above named child is free of any contagious diseases, and is in good physical condition, and able to participate in regular activities. Signing this registration form indicates that the above named student and his/her parents/guardians will adhere to the policies of the CCD program, which is affiliated with the Confirmation program.

Parent Signature: _____ ***Date:*** _____

Does your child have any learning or medical disabilities of which we should be aware? Yes No
If yes, please indicate condition:_____
Is he/she on any medication? Yes No

PLEASE LIST AN ADULT WE CAN CONTACT IN AN EMERGENCY IF UNABLE TO REACH PARENT:

Name: _____ Relationship: _____ Phone: _____

****Special Notations: A copy of your child's Birth, Baptismal, and First Holy Communion certificates is needed if your child did *not* received his/her First Holy Communion at Visitation of Our Lady Church. If your child did received First Holy Communion at VOL that information is already available.**

_____ **SESSION 2: Jan. 16 & 23, 2010** from 9:00 a.m. until 12:00 noon (Both classes must be attended)
Deadline to register for Session 2 is Friday, January 15, 2010
$25.00 payment can be made the first day of class or mailed to VOL.

This space is for office use only: Fee: **$25.00** Amt Paid:_____ Check #: _____Cash____ Rec. #_____

Grade: **11 – CHS** Session Attending: Session 1 Session 2 Info Sheet Done: _____