

# Confirmation Registration Form

**Registration Fee: \$150.00/Child (Includes retreat fee)**

Fees cover materials and costs of running the program. Scholarships are available. Please contact the office coordinator if you need a scholarship or payment plan.

**You will need to provide a copy of your child's Baptismal certificate with this registration.**

**Please Print** Date \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
City and State

Father's Name \_\_\_\_\_  
First Last

Mother's Name \_\_\_\_\_  
First Last Maiden

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone \_\_\_\_\_ Alternate phone \_\_\_\_\_

Email Address \_\_\_\_\_

Registered Parishioner at \_\_\_\_\_ Parish

Alternate Emergency Contact: \_\_\_\_\_  
Name Phone

\_\_\_\_\_ My child was baptized at one of the Cluster Parishes  
Baptismal Date \_\_\_\_\_

\_\_\_\_\_ My child was baptized at another Parish Parish \_\_\_\_\_

Address of Baptismal Parish \_\_\_\_\_  
if not St. Paul, St. Edward,  
St. Peter or St. George, Seattle \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_

For Office Use Only	
Baptismal Certificate <input type="checkbox"/>	Fee Paid - \$150.00 <input type="checkbox"/>
Cash _____	Check _____ Square _____
Date of Confirmation _____	Presider _____
Date Recorded _____	Notification Sent <input type="checkbox"/> Initials _____

