

OLV National Shrine & Basilica
Faith Formation
Confirmation Registration Form 2020/2021

Family Name: _____
Father's Last Name: _____
Mother's Maiden Name: _____

Family's Envelope Number: _____
First Name: _____ Religion: _____
First Name: _____ Religion: _____

Home Address: _____
(Street) (City) (Zip)

Phones: _____
(Home) (Work) (Mother's Cell) (Father's Cell)

Email: _____

If divorced, who has custody rights: *Father* ___ *Mother* ___ *Other* _____
Send mail to: *Father* ___ *Mother* ___ *other* _____
Other Address: _____

Child's Name: _____ Child's Cell Number _____

Birth Date: _____ Grade in Sept.: _____

Public School Student: _____ Catholic High School Student: _____

Special Needs Information: _____

*New Student's Only: Please submit a copy of Baptism Certificate.

*First Reconciliation Date & Place: _____

*First Communion Date & Place: _____

Child's Name: _____ Child's Cell Number _____

Birth Date: _____ Grade in Sept.: _____

Public School Student: _____ Catholic High School Student: _____

Special Needs Information: _____

*New Student's Only: Please submit a copy of Baptism Certificate.

*First Reconciliation Date & Place: _____

*First Communion Date & Place: _____

*Baptismal Date & Place: _____

*First Communion Date & Place: _____

Pictures/Video Permission

Pictures of Faith Formation students may be taken during the school year for use in class art projects, displays on the OLV Parish website & Facebook page, and for use in the church bulletin; at no time will children's names be published in connection with photos. If you check "NO" below, your child will be asked to leave the photography scene before photo is taken.

Yes, my child's picture may be taken.

No, my child's picture may not be taken.

Parents Signature: _____ Date: _____

Emergency Contact

In case of emergency and parent(s) cannot be reached at the phone number(s) provided; the following may be called.

Name: _____ Phone: _____ Relationship: _____

Registration & Book Fee for 2020/2021

Confirmation – Per candidate	\$80.00
Total Due:	

SPONSOR INFORMATION

Sponsor's Name _____

Sponsor's Home Parish _____

(please submit a letter of recommendation from home parish)

Sponsor's Address _____

Sponsor's Phone Number _____

***** For Office Use Only *****

Date Paid: _____ Check # _____ Amount: \$ _____

Received by: _____

*** Tuition Waiver for Faith Formation 2020 / 2021 Catechist: _____