

“ON THE OF” CONFIRMATION: REGISTRATION 2011-12

STUDENT INFO: _____

Confirmande's First & Last Name (as you want it to appear on the certificate)

School and grade for 2011-2012

Family/ Parent Email Address (this is how we will primarily communicate with you)

Parent/guardian Cell #_(_____)_____

(_____)_____

Mailing Address

City

Zip

Home Phone Number

ARE YOU A REGISTERED MEMBER OF ST. HELEN PARISH? _____ YES _____ NO

If NO, please indicate the name of your parish: _____

Last Name

Father (First Name)

Father's Religion

Mother's MAIDEN Name

Mother (First Name)

Mother's Religion

Payment /Registration Form is required on or before our Orientation meeting on September 18th
Please make checks to St Helen PSR

_____ Payment of \$40/ child is enclosed: _____ or _____
Check # Cash

PLEASE CHECK ONE: CHILD ATTENDS _____
EDGE ST. HELEN NOTRE DAME HOME SCHOOL

Sacramental Information: *Must enclose a copy of Baptismal certificate if not baptized at St. Helen

Place of Birth: City: _____ State: _____ Date of Birth: _____

Church of Baptism: _____ Baptism Date: _____

Address:

_____ Street

Phone: _____

_____ City State

Church of First Eucharist: _____ Eucharist Date: _____

Address:

_____ Street

Phone: _____

_____ City State