

*St. Elizabeth Ann Seton Catholic Church and Schools*

# Confirmation Preparation Registration Form 2010-2011

*(This form needs to be accompanied by a copy of your child's baptismal certificate.)*

Date: \_\_\_\_\_ Parish Number: \_\_\_\_\_  
(fecha) (# en la Iglesia)

Student's Name: \_\_\_\_\_ Grade 2010-2011: \_\_\_\_\_  
(nombre del estudiante) (last) (apellido) (first) (nombre) (grado en la escuela)

School \_\_\_\_\_ Public School District: \_\_\_\_\_  
(escuela) (distrito escolar)

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
(fecha de nacimiento) (masculino) (femenino)

\*\*\*Primary Family E-mail Address: \_\_\_\_\_  
(primario familia imel direccion)

Primary Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_  
(numero de telefono en casa)

Address: \_\_\_\_\_  
(direccion) (street) (calle) (city) (ciudad) (zip) (zona postal)

Student E-mail Address: \_\_\_\_\_  
(estudiante imel direccion)

Retreat Date Preference:  
(Retreats are filled on a first come first serve basis; permission forms and further information will be available in the Fall)  
( ) Jan 28<sup>th</sup>-30<sup>th</sup> ( ) February 18<sup>th</sup>-20<sup>th</sup>

Lives with: Mom \_\_\_\_\_ Dad \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_  
(vive con: (mama) (papa) (los dos) (otros))

|   |   |
|---|---|
| Father/Guardian: _____<br>(Padre o guardián)<br>Work Phone: ( ) _____<br>(telefono trabajo):<br>Cell Phone: ( ) _____<br>(Celular)<br>Religion: _____ | Mother/Guardian(Maiden Name): _____<br>(Nombre de soltera de la madre o guardián)<br>Work Phone: ( ) _____<br>(telefono trabajo)<br>Cell Phone: ( ) _____<br>(Celular)<br>Religion: _____ |
|---|---|

Emergency Contact if parent /guardian cannot be reached (contacto de emergencia):

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_  
(nombre) (parentesco) (telefono numero)

**Sacraments received (citar Sacramentos ya recibidos):**

**Baptism** – Date: \_\_\_\_\_ Church: \_\_\_\_\_  
Church Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

**First Reconciliation** – Date: \_\_\_\_\_ Church: \_\_\_\_\_  
Church Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

**First Eucharist** – Date: \_\_\_\_\_ Church: \_\_\_\_\_  
Church Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

**Faith Formation (CCE, Catholic School, etc.)**

Dates: \_\_\_\_\_ Location: \_\_\_\_\_  
Dates: \_\_\_\_\_ Location: \_\_\_\_\_  
Dates: \_\_\_\_\_ Location: \_\_\_\_\_

**Signature of Parent or Guardian** (Firma de padre o madre o guardian)

**OFFICE USE ONLY** Confirmation Preparation Program Fee: \$150.00 for Confirmation Texts/Materials/Retreat  
Date \_\_\_\_\_ Baptismal Certificate: \_\_\_\_\_ Amount: \_\_\_\_\_ Cash/Check: \_\_\_\_\_