

**ST. ANTHONY CONFIRMATION REGISTRATION  
2011-12**

Date \_\_\_\_\_

Student's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ HS Attending \_\_\_\_\_ Grade \_\_\_\_\_

Father \_\_\_\_\_ Religion \_\_\_\_\_  
Last First M

Address \_\_\_\_\_

Telephone (best number to be reached at) \_\_\_\_\_ (father)

Mother \_\_\_\_\_ Religion \_\_\_\_\_  
Maiden First M

Address \_\_\_\_\_  
(if different from above)

Telephone (best number to be reached at) \_\_\_\_\_ (mother)

E-Mail Address \_\_\_\_\_ father \_\_\_\_\_ mother

Check Status: (Parent) \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed

Child(ren) Live With: \_\_\_\_\_ both parents \_\_\_\_\_ mother \_\_\_\_\_ father

Communications to be sent to which parent: \_\_\_\_\_ both parents \_\_\_\_\_ mother \_\_\_\_\_ father

Are there any special concerns or situations that we need to be aware of? If so, state below. Please note allergies or illness.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please return this form along with the \$95 fee and the completed Baptismal form, Sponsor form & Parent/Guardian Consent & Liability Waiver by September 11, 2011. Thank you.**

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**FOR OFFICE USE ONLY**

Confirmation Fee Paid/Date \_\_\_\_\_ Check # \_\_\_\_\_