



St. John's Confirmation Registration Form

Student and Family Information:

Child's Name:		Date:
Grade (circle one):	School:	
5 6 7 8 9		
Date of Birth:	Baptism Date:	Location of Baptism:
Student's Email:	Access to Youth Facebook page? Yes or No	
Student's Cell:	Best way to communicate with you? Email, Text, Voicemail, FB	
Parent(s)/Guardian Names:		
Address:		Does child reside at this address?
City, State, Zip:		
Home Phone:	Cell Phone:	
Home Email:	Work Email:	
Parent(s)/Guardian Names:		
Address:		Does child reside at this address?
City, State, Zip:		
Home Phone:	Cell Phone:	
Home Email:	Work Email:	
Student Needs:		
<p>In order to help us make your child's confirmation experience rewarding, please let us know if he/she has special needs or medical conditions. This information may be helpful as leaders work closely to teach and nurture faith with each student. Please list your concerns and /or suggestions here. You may also talk with Pastor Aaseng, Pastor Christine or Chris Sims (Dir. Of Education) at 715-834-9571 prior to or during the year. _____</p> <p>_____</p>		
Photo Consent: On occasion we will be taking pictures of children participating in activities at St. John's. Please indicate if you give St. John's permission to use photos of your child for church promotions, publications or displays. <u>No names will be used.</u>		
_____ I agree to give St. John's permission to use photos of my child.		
_____ I do not agree to give St. John's permission to use photos of my child		
Registration Fee: \$20.00 / year due by September 3 rd		
Paid: Yes _____ No _____ Date: _____		