THE CHURCH OF ST. MICHAEL AND ST. GEORGE

CONFIRMATION REGISTRATION

_____ _____

Last name First Name Middle Name Nickname

_____ _____ _____

Address Zip Code Home Phone

_____ _____

School Attending Cell Phone

Student's email _____

Male: _____ Female: _____

Date of Birth & City/State:_____

Baptized: Yes _____ No _____

Date of Baptism:_____

Name of Church:_____

City & State of Baptism:_____

(If baptized at CSMSG, information can be obtained.)

Most recent Denomination:_____

_____ _____

Father's Name Cell Phone

Father's Email: _____

_____ _____

Mother's Name Cell Phone

Mother's Email: _____

Siblings (Grades)_____

_____

If you do not wish for the Youth Ministry to use photographs of your child in print or media publications, please complete the Media Opt Out form on the Church website.