

# Confirmation Registration Form

Grades 7 & 8 (Wednesday 7-8PM)

St Joseph, Lincoln Park

2025-2026

Student: \_\_\_\_\_ [M or F] Grade \_\_\_\_\_ in Sept 2025  
Student's Email: \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age: \_\_\_\_\_  
School: \_\_\_\_\_ cell#: \_\_\_\_\_

Medical conditions, allergies, dietary or learning concerns that would be helpful to note.

Sacraments received: Name the parish and town where they were received.

Baptism: \_\_\_\_\_

Reconciliation: \_\_\_\_\_

Communion: \_\_\_\_\_

## **Family Information:**

Father's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Student in care of: \_\_\_\_\_ Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Guardian \_\_\_\_\_

I, \_\_\_\_\_, understand that I will be required to attend weekly Mass [sign-in], attend class, complete all assignments, pass the final exam, and participate in programs and volunteer time to receive the Sacrament of Confirmation.

\_\_\_\_\_  
*Student's Signature*

**7<sup>th</sup> & 8<sup>th</sup> Grade Fees: \$100 per student or \$150 for 2 students**

**Make checks payable to St. Joseph Parish and please return by August 15, 2025**

## **Media Consent Form:**

Would you allow your child/ren's photos to be shown in the parish bulletin, parish website, or the Beacon?

\_\_\_\_ Yes, I would allow. \_\_\_\_\_

*Parent Signature*

\_\_\_\_ No, I would not allow. \_\_\_\_\_

*Parent Signature*

# DO NOT WRITE IN THIS BOX

Baptism (Parish & Town, if applicable: \_\_\_\_\_)

Fees: \$100 per student

\$150 for 2 students

\$ 20 Late Fee after August 15<sup>th</sup>

Amount: \_\_\_\_\_

Late Fee: \_\_\_\_\_

Check#/Cash: \_\_\_\_\_

Date: \_\_\_\_\_