Our Savior’s Lutheran Church

Confirmation Registration 2022-2023

Parent/Guardian Information

|  |  |
| --- | --- |
| Name |  |
| Address |  |
|  |  |
| Phone Number: Best number to reach you |  |
| Are you ok receiving text messages? |  |
| Email address |  |

Youth Information

|  |  |
| --- | --- |
| Name |  |
| Birth Date |  |
| Grade |  |

Health Information

List any medical needs (ex. allergies – food, insects; physical/learning restrictions)

Additional Information

List any additional information you feel we need

Emergency Contact Information

|  |  |
| --- | --- |
| Name |  |
| Relationship |  |
| Phone Number |  |

Parent Volunteer Opportunities

* Assist and/or substitute in classroom
* Assist with celebrations
* Assist with service projects
* Provide transportation

Promotional Release

I give permission for my child’s photo to be included for our website, or in print. No names will be used. Y \_\_ N \_\_

Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_