

# REGISTRATION FOR THE SACRAMENT OF CONFIRMATION 2008-2009

**For Youth in Grades 11 - 12 who have not been confirmed and have participated in the life of the parish for 1 full year prior to beginning the preparation process.**

The parent(s) of \_\_\_\_\_  
*(Please print the first and last name of the youth)*

Age \_\_\_\_\_ Grade \_\_\_\_\_ would like their teenage youth to participate in St. Elizabeth Ann Seton Parish faith formation program to assist them with their youth's preparation for the Sacrament of Confirmation.

Your Family's Current Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Youth's Email Address: \_\_\_\_\_

We are registered at and presently attending: \_\_\_\_\_ Parish

Mother's first and maiden name: \_\_\_\_\_

Mother's faith: \_\_\_\_\_

Father's name: \_\_\_\_\_

Father's faith: \_\_\_\_\_

Our child was born in \_\_\_\_\_ on \_\_\_\_\_  
*(City and State) (Month/Day/Year)*

and was baptized at \_\_\_\_\_ on \_\_\_\_\_  
*(Name of Church) (Month/Day/Year)*

\_\_\_\_\_  
*(City & State of Church of Baptism)*

**Regardless of the location of baptism, a copy of your child's baptismal certificate is required in addition to this form.**

**If you have questions, please contact Deacon Dez, Director of Youth Ministry  
644-9732 or email:dez@akseas.net**