



**Confirmation Registration - please fill out all pages.**

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Formation Grade: \_\_\_\_\_

**Are you registered members of OLL Parish?** Yes \_\_\_\_\_ Envelope# \_\_\_\_\_ No \_\_\_\_\_

If no, name of parish you are registered member of: \_\_\_\_\_

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_

Step Parent/Guardian's Name \_\_\_\_\_ Religion \_\_\_\_\_

**Please Provide a copy of your students Baptism Certificate. We do not keep them on file from 1<sup>st</sup> Communion.**

<b>Student Sacramental Record:</b>	<u>Name of Parish/Place</u>	<u>Date</u>
Baptism	_____	_____
Reconciliation	_____	_____
First Communion	_____	_____

**Email correspondence to:**

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

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

**Contact During Class:** Name \_\_\_\_\_ Phone \_\_\_\_\_

**Emergency Contact:** Name \_\_\_\_\_ Phone \_\_\_\_\_

Does your child take medication or need any special assistance ? If yes, please explain:

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**Person(s) authorized to pick-up your child:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

**Custodial Information: Please complete if separated, divorced or a designated guardian. The parish must retain a copy of the legal agreement designating person[s] responsible for decisions related to faith of the child. The following person has legal authority for raising this child in the Catholic faith:**

Name \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

**List all persons living in your home:**

Name	Age	Relationship to Child
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**L.I.F.E. Program**

Love, Infatuation, Friendship and Exploitation (LIFE) program will be offered during regularly-scheduled Sunday (English) and Wednesday (Spanish) classes. **At least one parent/guardian must attend with their child.** The program guides parents in talking to their children about relationships at age-appropriate levels and from a Catholic perspective. Parents/guardians may opt out their children. The Diocese of Orlando requires either participation in the LIFE program or completion of an opt-out form.

**Please initial here \_\_\_\_\_** to confirm acknowledgement of LIFE program and receipt of an opt-out form.

\_\_\_\_\_  
**Registering Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

**OFFICE USE ONLY:**

Grade \_\_\_\_\_ Catechist \_\_\_\_\_

Student[s] Name \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Check # \_\_\_\_\_ Cash \_\_\_\_\_

One child \$0

Two children \$0

Three or more children \$0

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