

CONFIRMATION REGISTRATION FORM

St. John Neumann Confirmation Program
157 Middleboro Road P.O. Box 718, East Freetown, MA 02717

Office Use
Date _____
Cash _____
Check # _____

Candidate Information

Candidate's name: _____ Grade _____
Last First Middle Initial

Address: _____
Street/P.O. Box City/Town State Zip

Date of birth: _____ Home phone: _____

Please complete only if Candidate **did not** receive the sacraments at St. John Neumann Parish and/or is new to the parish:

Baptism*: _____
Date Parish City State

First Eucharist*: _____
Date Parish City State

***Please include a copy of the sacrament's certificate if it was not received at St. John Neumann**

Is the Candidate's family registered at St. John Neumann Parish? Yes No

If no, what parish is family registered at? _____

Parent/Guardian Information

Father's Name: _____ Religion: _____
First Last

Living with child? Yes No Work phone: _____ Cell _____

*Email address: _____

Mother's Name: _____ Religion: _____
First Last *Maiden Name

Living with child? Yes No Work phone: _____ Cell: _____

*Email address: _____

Parent/Guardian Mailing Information (only complete if different from above; please include 2nd mailing address, if needed)

1st Address: _____
Mr. & Mrs.; Mrs.; Mr.; Ms. First Last

Street/P.O. Box City/Town State Zip

2nd Address: _____
Mr. & Mrs.; Mrs.; Mr.; Ms. First Last

Street/P.O. Box City/Town State Zip

(Continued on back)

Emergency Information

In an emergency, if parent/guardian cannot be reached, please notify:

Name: _____ Telephone: _____

Relationship: _____ Cell phone: _____

Health and Wellbeing

Does your child have any allergies that we should be aware of? Yes No

If yes, what are they: _____

Please include any information that will help us best serve your child, such as any educational, physical, medical, spiritual or emotional needs:

Safety

Is there any court injunction regarding an individual and the safety of your child? Yes No

If yes, please see someone in the office.

Previous and Current Education

What grade level has the candidate completed in religious education and at what parish?

Is the candidate enrolled in a Catholic School? Yes No

If yes, where enrolled? _____

What school is the candidate attending in September? _____

Other Comments/Needs

***This information is very important. Please be sure to fill it out.**