



CONFIRMATION REGISTRATION 2017-2018

Please complete and turn in, even if you have done so in previous year!

Name: _____ Birth Date: _____ Grade: _____

Address: _____

City: _____ St: _____ Zip: _____ Home Phone: _____

Student's Email: _____ Student's Cell Phone: _____

Parent/Guardian Name: _____ Work/Cell Phone: _____

Email: _____

Parent/Guardian Name: _____ Work/Cell Phone: _____

Email: _____

Have you been baptized? Yes _____ No _____ Baptism Date: _____
(approximate date if exact date not know)

Have you had your first communion? Yes _____ No _____ Where: _____

Please share any additional information about the student we should know to help make this a successful year.

My photo can be taken and used by Augustana for promotional purposes. (Your photo will never be sold or used outside of Augustana.) My photo can be used Do not use my picture

Paid \$15 Program Fee

Checks can be made out to Augustana Lutheran Church. Please enclose your payment with this form and return it to Augustana by **Monday, August 28, 2017**.

Don't forget to follow us on our Augustana Facebook and our AugustanaYFM Instagram accounts for pictures, announcements, and updates!

Student Signature: _____

Parent/Guardian Signature: _____

Thank you!