

HOLY CROSS LUTHERAN CHURCH

Confirmation Registration Form

(Grades 6-8)

Your Full Name _____ School Year _____

Street Address _____

City _____ State _____ Zip Code _____

Date of Birth _____ Gender _____

Parent Name(s) _____

Confirmation Student Email Address _____

Household Primary Email Address _____

Parent Cell Phone Number _____

Household Primary Phone Number _____

Student Cell Phone Number _____

Student Allergies _____

Photo Release Permission - I grant permission by marking Y (yes) or N (no) for my child's photograph to be used in Holy Cross Lutheran Church communication as follows:

_____ Website _____ Newsletter/Bulletin Printings _____ Bulletin Boards