

2009 Registration Form - Please complete & return to the Youth Ministry Office by September 27th, as well as your \$40 supply fee

St Jude Confirmation Enrollment Form

Candidates Full Name: _____

Nick Name: _____

Date of Birth: _____

Graduation YR: _____ School: _____

Parent(s) or Guardian Name(s): _____

Address: _____

City/St/Zip: _____ Home Phone _____

Best Contact Number: _____

Parent e-mail: _____

Baptism Information:

Name of Church: _____

Address of Church: _____

City/St/Zip of Church: _____

Date of Baptism: _____

(Include copy of Baptismal Certificate with this form- unless you were Baptized at St Jude)

Received First Eucharist Date: _____

Name of Church: _____