

Registration Form- Please complete and return at the next meeting or to the Youth Ministry Office by October 16th, as well as your \$40 supply fee.

St. Jude Confirmation Enrollment Form

Candidates Full Name: _____

Nick Name: _____

Date of Birth: _____

Graduation YR: _____ School: _____

Mother's Full Name: _____ Maiden Name: _____

Father's Full Name: _____

Address: _____

City/St/Zip: _____ Home Phone: _____

Candidate Cell: _____

Candidate email: _____

Parent email: _____

Parish Registered at: _____

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: _____