

LIGHT OF CHRIST CONFIRMATION REGISTRATION
REGISTRATION TUITION FOR CONFIRMATION: \$60 PER CHILD

2016-2017

Welcome to Sacramental Preparation at Light of Christ! To help us serve you better, we ask that you:

- **PRINT CLEARLY** and fill out all forms completely. Please contact us if any information below changes.

SACRAMENTAL PREPARATION REQUIREMENTS:

- 1) Family is registered, active members of Light of Christ Catholic Church.
- 2) Attendance in the **previous year*** at: Faith Formation Classes, Catholic School (or Home School).
- 3) Attach a copy of your child's Baptismal Certificate if one is not already on file.

****"Preparation for Confirmation is to be held over a two-year period. The teen may approach the sacraments during the second year of attendance." (Diocesan Catechetical Guidelines)***

~ STUDENT INFORMATION ~

First Name: _____ Middle: _____ Last: _____ Sex (M/F) _____

Address Child resides at: _____

City: _____ State: _____ Zip: _____

School: _____ Current Grade: _____ Date of Birth: _____

Baptism: _____ (Date) _____ (Church) _____ (City) _____ (State)

Was child baptized? Yes No; Did child receive 1st Communion/1st Reconciliation? Yes No

Did the student attend Light of Christ Faith Formation (EDGE or Life Teen) last year? Yes No

If yes, what Grade/Class _____. If the student did not attend Light of Christ Faith Formation last year, has the student previously received religious education in a Faith Formation program, Catholic school, or registered home school program? Yes No If yes, when and where? _____

Are there any special needs your child has – such as medical conditions, learning needs, allergies, family situations, etc., which we should be aware of? _____

~ PARENT INFORMATION ~

Father's Name:

_____ (First) _____ (Middle) _____ (Last)

Father's 1st Language: _____; 2nd Language: _____ Prefer written papers in English Spanish

Mother's Name:

_____ (First) _____ (Middle) _____ (Last) _____ (Maiden)

Mother's 1st Language: _____; 2nd Language: _____ Prefer written papers in English Spanish

Parent's Marital Status (please check one): Married Separated Divorced Widowed Single

Child resides with: Both Parents Mother Father Other: _____

Are you a registered member of Light of Christ Church: Yes No

~ COMMUNICATION INFORMATION ~

LOC Confirmation & Life Teen uses Flocknote to help people feel connected. Parents and guardians receive regular updates and important news from the office to inform you of any schedule changes or events. Your personal information cannot be accessed by another individual registered on the network. No one except an authorized network administrator has access to any member's information.

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Parent's preferred method of receiving regular LOC Confirmation & Life Teen updates through our LOC Flocknote Communication System: Text Messages E-mail Both

Father's Phone: Home: _____ Cell: _____

Mother's Phone: Home: _____ Cell: _____

Father's Email: _____

Mother's Email: _____

If for any reason you need to contact our office you Director of Faith Formation at 442-7081

<i>In the event of an emergency and parents/guardians are unavailable, who should we contact?</i>	
Emergency Contact:	
Relationship:	
Home Number:	Cell Number:
Parent/Guardian's Signature:	
<i>Be assured of confidentiality in any disclosures made to our office. Information is shared only when necessary with emphasis on confidentiality.</i>	

PAYMENTS: No family is kept away from Faith Formation due to a lack of funds. If you have a need, speak with, Director of Faith Formation at 442-7081

Also, we gratefully accept tuition donations in support of those in need.

PARENT/GUARDIAN CONSENT: I consent to my child being registered in the Light of Christ Religious Education Program. I am aware that they will be instructed in Roman Catholic Doctrine and Traditions. As the person primarily responsible for my child's faith formation, I agree to reinforce those teachings and practices by being registered in the parish. I also take responsibility for their attendance, and to instruct my child regarding proper behavior while attending the Religious Education Program.

Parent Signature: _____ **Date:** _____

<i>For Office Use Only</i>	Check #:	Paid Cash <input type="checkbox"/>	Amount Pd.:	Balance Due:
Date Received:	Data Entered:	Baptism Cert. <input type="checkbox"/>	Signatures Complete? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Comments:</u>				