

## Our Lady of Lourdes Catholic Parish 2020-2021 Confirmation Registration

Diudelli Ivallie			Grada	Data of Pinth
Homeschooled Ves	or Name of Sch		Grade	Date of Birth
arent Email			Parent Cell Phone	
mergency Contact	Relat		tionship	Phone:
allergies, medical condi-	tions, physical, a	cademic or a	any other spec	cial assistance or concerns: _
'ather's Name			Religion	
			Religion	
Confirmation Sponsor N Mother's Maiden Last N	lame lame			
BAPTISM INFORMAT	ΓΙΟN:			
DATE OF BAPTISM:				
	(month)	(day)	(4-digit ye	ar)
	•			
PLACE OF BAPTISM:				
PLACE OF BAPTISM:	(church name)		(address)	
PLACE OF BAPTISM: FIRST COMMUNION	(church name)		(address)	)

Parent/Guardian Signature

Date