

Trinity Confirmation Ministry 6th Grade Registration Form

2018-19

PLEASE: Return this Registration Form with Payment by September 1, 2018

*ATTN: Brenda Connolly
Trinity Lutheran Church
405 S Rush ST
Roselle, IL 60172*

Student Information:

FULL NAME: _____ Nickname? _____
First Middle Last

ADDRESS: _____
Street City State Zip

HOME (____) ____-____ BIRTH DATE: ____/____/____ BAPTISMAL DATE: ____/____/____

CELL (____) ____-____ **Primary Email (Please Print) _____

SCHOOL ATTENDING IN 2018/19: SCHOOL _____

WHICH HIGH SCHOOL DOES STUDENT PLAN TO ATTEND: _____

Parent/Guardian Information:

Father – Name: Cell: (____) ____-____ <input type="checkbox"/> Member <input type="checkbox"/> Non-member Email: _____	Mother – Name: Mother's Maiden Name _____ Cell: (____) ____-____ <input type="checkbox"/> Member <input type="checkbox"/> Non-member Email: _____
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****Please let us know** on the reverse if there is another guardian's phone and/or email to add as most parent/guardian Confirmation info is sent by email.

Item	Total
Confirmation Fee (includes the following):	\$ 50.00
6 th Grade– Supplies for Wednesday nights, Curriculum fees and TEEN Bible.	
Additional:	
<i>TEEN Bible</i> - \$20 (in case you want another Bible for home or you lost yours)	
I would like to help another family with their Confirmation fees in the amount of...	\$
TOTAL FEES: Check payable to: <u>Trinity Lutheran Church</u> in full by September 1, 2018. If this is not financially possible, please contact: brenda.connolly@trinityroselle.com to make arrangements.	\$
	\$

For Office Use Only:

Received ____/____/____ By (name): _____ Cash Check #: _____ Amount: \$ _____