

## Confirmation Registration Card

### Confirmand Information

Full Name (First, Middle, & Last): \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Pronouns: \_\_\_\_\_ Birthday: \_\_\_\_\_

Have you been Baptized? ☐ Yes, Year of Baptism: \_\_\_\_\_ ☐ No, I need to be Baptized

Current Grade: \_\_\_\_\_ Middle School: \_\_\_\_\_

High School (attending in the Fall): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Allergies: \_\_\_\_\_

Food Requirements (Gluten-Free, Vegetarian, etc.): \_\_\_\_\_

Interests/Hobbies: \_\_\_\_\_

Any Additional Information: \_\_\_\_\_

### Parent/Guardian Information

Parent/Guardian 1 Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Are you a member of St Andrew? ☐ Yes ☐ No ☐ I would like to become a member

Parent/Guardian 2 Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Are you a member of St Andrew? ☐ Yes ☐ No ☐ I would like to become a member

### Emergency Contact Information

Emergency Contact Name: \_\_\_\_\_

Relationship to Confirmand: \_\_\_\_\_ Phone Number: \_\_\_\_\_