Our Saviour's Evangelical Lutheran Church
Confirmation Registration
September, 2009 - September, 2010

Please complete and return immediately!

Grade: _____ *(for the 2009-2010 school year)*

Name: _____ ☐ *Female* ☐ *Male*
First *Middle* *Last*

Date of Birth: _____ Home Phone: _____

Address: _____

Mother's Name: _____ Father's Name: _____
(or Guardian's) *(or Guardian's)*

Address: _____ Address: _____
(only if different from above) *(only if different from above)*

Who is the primary contact? ☐ *Mom* ☐ *Dad* ☐ *Both* ☐ *Guardian*
E-mail address used by primary contact: _____
Church Membership: ☐ OSEL ☐ Other: _____
Interested in Membership? ☐ Yes ☐ No
Has student been baptized? ☐ Yes Date: _____ ☐ No
Has student received First Communion instruction? ☐ Yes ☐ No

Do you give permission to use photos of your child in OSEL publications, including newsletters, church website, brochures, & official publications: ☐ Yes ☐ No

_____ _____
Signature of Parent ***Date***

Confirmation Volunteer Ministry Opportunities

(Please write the name of the person volunteering.)

- ☐ Small Group Leader *(4-5 students/group)* _____
- ☐ Wed. Evening Resource Center Assistant *(1/grade needed)* _____
- ☐ 7th grade: Snack Provider and/or Server *(2 special events)* _____
- ☐ 7th grade: Serve on Confirmation Leadership Team _____
- ☐ 7th grade: Service Projects Coordinator _____
- ☐ 7th grade: Worship Note Record Keeper _____
- ☐ 8th grade: Seder Preparation *(March 28, 2010)* _____

Complete both sides of form.