



Confirmation Registration and Release Form 2016-2018

Cost for materials:\$75 for 7th graders (scholarships available)

Please make checks payable to: Christ Lutheran Church

Student name First _____ Middle _____ Last _____

Goes by _____ M F Birth date _____ Grade ____ Paid

Address _____ City _____ State _____ Zip _____

Student Cell # (If available) _____ okay to text? Y N Student Email _____

School currently attending _____ High school planning to attend _____

Baptism Date _____ (dd/mm/yyyy) Custodial Parent (s)/Guardian(s) _____

Home Phone # _____ Work # _____ Cell# _____

Parent E-mail _____ (Email notices will be sent out with important updates, events, and encouragements.)

Any known health conditions _____ Date of most recent tetanus shot _____

Health Carrier Plan _____ Name of Insured _____

Relationship to Participant _____ SS # **OR** Policy # **OR** Insurance ID Number _____

Additional Emergency contact person _____ Phone # _____ Relationship to student _____

Special Needs: Please list any special needs, including allergies, learning or physical challenges, and other information that we should know to best minister to your child and your family. _____

I, the undersigned, am the parent, the parent having legal custody, or the legal guarding of _____, a minor, and have given our consent for him or her to attend Confirmation classes at Christ Lutheran Church from September 2016 to October 2018. I agree to hold the church and/or its agents guiltless in the event of an accident or injury to my child (named above) while participating in the Confirmation program. I also give permission for the church and/or its agents to order necessary medical care & treatment in the event of an emergency. In such an event I understand I will be contacted as soon as possible. I also acknowledge that I will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider.

Promotional: Christ Lutheran Church may use comments, photos & videos of named student in promotional pieces.

Student Covenant Statement: I commit to participate in class to my fullest capacity, to worship on a regular bases at CLCM

Complete confirmation requirements including the 4 x10 , and serve others using the gifts God gave me. I will ask questions when I don't understand and take ownership for classwork along the way. X _____

Parent Covenant statement: I/we commit to support our son/daughter in this process by asking questions when we don't understand, attending parent connection, attending worship on a regular basis at CLCM, supporting him/her in Confirmation/Refuge attendance and serving others. I/we commit to keeping communication open with the Confirmation staff, so that they can best support me/us X _____

I have completed the above requested information, have read and agree to the above statements/conditions.

X _____

Signature of Parent(s) or Guardian

(Date)

Questions? Contact Brandon Heath at Bheath@christlamesa.org or at 619-462-5211 ext. 129

Completing and returning this form registers you for the 2016-2018 Confirmation program

Please return this form to Brandon by email, snail mail, or drop off at church or school office: