

Confirmation Registration Form

2010-2011

St. Margaret's Religious Education Office

203 Roxboro Road

Mattydale, New York 13211

455-2203



Candidate's Name _____

Address _____

Street

City

Zip

Home Phone _____ Cell _____ **Email _____

(Parents and students)

Date of Birth _____ Grade _____ School _____

Father's Name _____ Religion _____

Mother's Maiden Name _____ Religion _____

Baptism _____

Date

Church

City/State

First Communion _____

Date

Church

City/State

First Reconciliation _____

Date

Church

City/State

** Please include an email address if you have one. Much correspondence will be done via email.

Please attach a copy of the Candidate's Baptismal Record to this registration form.

A registration form is not complete if a baptismal certificate is not attached,

unless the student was baptized at St. Margaret's

Please return this form to the Religious Education Office
at your earliest convenience.

Registration Fee: \$30.00 must accompany registration form