

St. Anselm Parish Confirmation Registration Form 2018-2019

530 South Mason Road, Creve Coeur, MO 63141, Phone: (314) 878-2120, Fax: (314) 878-2199

Candidate Information

Candidate Name _____ Preferred Name _____
First Middle Last

Street Address _____ City _____ State _____ Zip Code _____

Home Phone _____ or N/A Birthday ____/____/____ Sex _____ Male _____ Female

Allergies _____ Rx _____

Special Needs/ Medical Conditions _____

Full Time School 2018-2019 _____ Grade _____

Previously attended religious education _____ Yes _____ No _____ If yes, where? _____

Church of Candidate's Baptism _____

City _____ State _____ *(please attach a copy of Baptismal certificate)*

Child's cell number _____ (Flocknote text reminders) T-shirt Size: _____ (Luke 18 retreat shirt)

Family Information

Father _____ Mother _____
First Last First Last

Religion _____ Religion _____

Occupation _____ Occupation _____

Status _____ Status _____
(Married, Separated, Divorced, Remarried, Widowed)

Address _____ Address _____

Father's Cell Phone (_____) _____ Mother's Cell Phone (_____) _____

Father's Email _____ Mother's Email _____

Registered in St. Anselm Parish? _____ Yes _____ No _____ If no, where? _____

Do you have a letter from the pastor of that parish delegating responsibility for the student's sacramental preparation to St. Anselm? _____ Yes _____ No

(form continued on back)

Emergency Contact Information (if parent(s) cannot be reached in the event of an emergency)

Name _____ Relation to Participant _____

Home Phone (_____) _____ Cell Phone (_____) _____

Medical Information

Do you authorize St. Anselm staff and volunteers to administer over-the-counter medications and basic first aid at the request of your child? This includes, but is not limited to, Tylenol, Motrin, Benadryl, cough drops, Band-Aids, and Neosporin. Yes No

Family Doctor _____ Doctor's Phone (_____) _____

Medical Release Statement

I (We), the parent(s) or legal guardian(s) of the above listed child grant permission for our child to participate in the Confirmation program at St. Anselm in Creve Coeur, MO and to receive medical treatment if necessary. If I (we) or the listed child care provider or emergency contact(s) cannot be reached, I (we) give our permission to the staff to secure the services of a licensed physician to provide necessary care, including anesthesia, for my child's well-being. I (we) also release and agree to hold harmless the Archdiocese of St. Louis, St. Anselm, and all its participants and volunteers from any liability and assume all risk from injury, damage or expenses as the result of participation in activities throughout the Confirmation program.

Parent/Guardian Signature _____ Printed Name _____

Date _____

Media Release Statement

I (We) understand that as a participant in St. Anselm's Confirmation program, my child(ren) may be photographed or videotaped during the various retreats, classes and activities. I hereby authorize the use of these photos and/or videos taken of my child during the Confirmation program be allowed for promotional purposes on St. Anselm's website, Facebook, Instagram, Twitter, and other promotional material published by St. Anselm. I release St. Anselm from any and all liability.

Parent/Guardian Signature _____ Printed Name _____

Date _____

**Please return this form to the St. Anselm Parish Office with a copy of the candidate's baptismal certificate and the \$180 registration fee (includes retreats).
Please make checks payable to St. Anselm Parish.
Call the Parish Office at 314.878.2120 with any questions!**