

OUR LADY OF FATIMA CONFIRMATION 2017-2018 Registration

\$50.00 Registration Fee made out to: Our Lady of Fatima Church

DEADLINE: September 1, 2017

(A **\$25 Late Fee** will be assessed on forms received **after 9/1/17**)

Return form with payment to: Our Lady of Fatima Church Parish Office, 2319 Johnston St., Lafayette, LA 70503

MANDATORY MTG: Sept. 14, 2017 6:15 PM **CATECHISM MASS:** Nov. 12th (11am & 5pm ONLY)

CONFIRMATION Retreat: Jan 6-7, 2018

NO REGISTRATION WILL BE ACCEPTED WITHOUT A BAPTISMAL CERTIFICATE !

Please **PRINT CLEARLY** NO initials or nicknames! NAME will appear this way on the CERTIFICATE!!!

Candidate's FULL Name:

_____ Gender: _____ M _____
First Middle Last

Date of Birth: _____ Age: _____ Place of Birth: _____
Month/Day/Year City State

Mailing Address: _____
Street City State Zip

Home: _____ Cell: (M) _____ (F) _____
(Circle One) TEXT ACCEPTED: Y N (Circle One) TEXT ACCEPTED: Y N

School Candidate Attends: _____ Grade entering Fall of 2017: _____

Baptismal Date _____ **Church of Baptism:** _____

NAME of Child's FATHER on Baptismal Certificate: _____

					First		Middle		Last
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Church of Baptism ADDRESS: _____
(If NOT OLOF) City State

First Eucharist: Date _____ Church _____
City, State

Parent's Main Email: _____

Head of Household/Husband's Legal Name: _____ Religion: _____
First Middle Last Suffix

Mailing Address: _____
(If different from above) Street City Zip

Mother's FULL Name: _____ Religion: _____
First Middle Maiden Last

Mailing Address: _____
(If different from above) Street City Zip

currently NOT a registered parishioner of Our Lady of Fatima Roman Catholic Church, you MUST obtain a LETTER OF PERMISSION from

the Church in which you ARE registered or in whose geographical boundaries you reside in order to receive any Sacraments at

Registered Member of _____

Church Parish _____ **City, State** _____

(Safe Environment Education is **REQUIRED** by all **NON Catholic School Students ONLY!**)

Students may OPT OUT of this mandatory class With Parental consent and Signature

My child & I will NOT attend the Safe Environment Education class: _____

(Parent's Signature) _____ (Date) _____

Reg. Fee: Amt. Pd _____ Date Rec'd _____ Check # _____ Cash _____ Revised 6/6/2017