

# St. Margaret of Scotland Catholic Church

## Confirmation 2010 – Registration

777 NE Blackwell Road, Lee's Summit, MO 64086

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Please print or type

Name: (first) \_\_\_\_\_ (last) \_\_\_\_\_

Preferred name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Teen's e-mail address (if checked periodically): \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

Custodial Parent(s): \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address if different from above: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

\_\_\_\_ I am interested in viewing the Called to Protect program or more detailed information regarding the curriculum about sexuality.

*(All correspondence will be sent to the address listed above unless otherwise notified)*

Non-custodial Parent (s): \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

### EMERGENCY CONTACT NUMBER *(In event we can not reach parent/guardian at the above numbers.)*

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

**Registration form, a copy of your child's Baptismal Certificate, a recent photo and \$70.00 registration fee for Confirmation 2010 are due by Sunday, November 16th.**

**\*\*\*Registrations turned in after November 16 will be charged a \$20 late fee.\*\*\*  
*Absolutely no registrations will be accepted after the opening retreat on January 24.***

***Since this is a Sacrament, families must be registered parishioners of St. Margaret's.***

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FOR OFFICE USE ONLY: Baptismal Certificate \_\_\_\_\_ Fee paid \_\_\_\_\_