

Our Savior's Lutheran Church - San Clemente, California
Confirmation Information Form

Child's Full Name: _____
 First Middle Last

Date of Birth (include the year) _____ Age _____

Grade beginning August 2018 _____

Parent's Name(s) _____

Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

E-mail _____

Is your child baptized? _____ Yes (Include Date if known) _____ No _____

Does your child have a Bible that he/she can bring to Confirmation? Yes _____ No _____

Does your child have any learning handicaps? If so, please explain:

Are there any dates/events that will conflict with your child participating in Confirmation?

If so, what & when? _____

