



Saint Ann

CATHOLIC CHURCH
2900 W. Galbraith Rd. - Cincinnati, OH 45239

Confirmation Student Registration Form

Student's Full Name: _____
First Middle Last

Address: _____

Birthdate: _____ Age: _____ Grade: _____

Family Contact Information

Home Phone #: _____ Cell Phone #: _____

Email Address: _____

Father's Name: _____
First Middle Last

Mother's Name (Including Maiden Name): _____
First Middle Maiden Last

Was your son/daughter baptized at St. Ann? () YES () NO

If NO, please provide a **copy of their baptism certificate** or the following information:

Church where your child was baptized: _____

Address of the Church: _____

Phone number of the Church: _____

- In addition, if your child was not baptized at St. Ann, please attach a copy of his/her baptismal certificate to this registration*
- There is a \$40 Retreat Fee that will cover the expenses for the two Confirmation retreats and may be submitted with this registration form.*