

2018-2019 Confirmation Registration Grades 6, 7, 8, 9

Gethsemane Lutheran Church and School | 2410 Stillwater Rd. E. Maplewood, MN 55119 | 651-739-1264 Ext. 112 | www.geth.org | facebook

Please register early! This helps with placement in small groups on the first night of weekly confirmation!

Registration needs to be received by Friday, September 7, 2018.

Complete boths sides of this form--please print legibly

Student Information				
Last Name	First		Middle	DOB:
Address		City		State Zip
Cell phone	Baptized?	Yes or No	Receiv	ved 1st Communion? Yes or No
Student's school & Grade	e:			Email:
Student Lives with: Both	Parents or Mon	n or Dad	or	
Parent Information				
Last Name	First		Cell #	
Address		City _		State Zip
Home phone	Email:			_ Member of Geth? Yes or No
Parent Information				
Last Name	First	(Cell #	
Address		City		 State Zip
Home phone	_ Email:			Member of Geth? Yes or No
We don't want money to be Payment options: a.) Preferred option: Pay with b.) Please make checks pay c.) Place cash into envelous I would like a grant of \$1.000.	e an obstacle. Gra with card using			

An overnight retreat experience centered in worship, prayer, scripture, conversation and fun powerfully impacts faith and Christ-centered relationships. This retreat will occur in January on a Friday night with return on Saturday evening. Please let us know of any concerns you have regarding this event.

Please take the time to tell us about you child. List medical concerns (allergies, etc)
Learning Tips/Tricks:
Emotional & Behavioral:
Family/Friend Concerns:
This information provided will help us to pair your child in the appropriate group, inform leaders of the needs and help them have the best experience possible in Confirmation ministry. This is helpful for greater awareness during our retreat weekend.
Authorization for medical treatment "I give permission for my child to attend Gethsemane Lutheran Church Faith Formation Programs and to take part in regular program activities. I authorize Gethsemane Lutheran to provide any necessary medical care in the event of an emergency. I understand that I will be notified as soon as possible if emergency care is needed." Parent/Guardian Signature:
Photo Release Authorization "During classes/activities, your child may be photographed. By signing you are giving Gethsemane permission for photographs to be used in such ways as: newsletter emails, bulletins, slideshows, church presentations, bulletin boards and the church media post (website, Facebook, etc) for promotional purposes and sharing for Gethsemane Lutheran. Parent/Guardian Signature:

Sign up for text alerts using REMIND app.

Class name: Geth Confirmation Class Code: bsliv School: Gethsemane Lutheran School



Director of Confirmation Ministry Becky Sliva, <u>bsliva@geth.org</u>, 651-739-1264 ext. 112 Cell: 920-364-0410 Senior Pastor Elizabeth Wilder, <u>ewilder@geth.org</u>, 651-739-1264 ext 101 Cell: 651-925-7022