

# St. Blaise Catholic Church

## Confirmation Registration

1158 South Main Street, Bellingham, MA 02019

2023-2024

### FAMILY INFORMATION

**Family Last Name:**

**Date:**

Father's Name: \_\_\_\_\_

Father's cell: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's cell: \_\_\_\_\_

Mother's Maiden: \_\_\_\_\_

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

Primary Phone: \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_

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

Emergency Phone: \_\_\_\_\_

City, ST, Zip: \_\_\_\_\_

### STUDENT INFORMATION

Child's Name: \_\_\_\_\_

**Sacrament Details:**

Date of Birth: \_\_\_\_\_

Baptism:

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

Parish Name: \_\_\_\_\_

Class: Year 1

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

Year 2

Eucharist:

Parish Name: \_\_\_\_\_

Special Needs: (Medical, Learning Disabilities, Physical Disabilities, etc.):

\_\_\_\_\_  
\_\_\_\_\_

### TUITION INFORMATION

Tuition: \$75.00

Amount Paid: \_\_\_\_\_

Balance: \_\_\_\_\_

If you have any questions please contact the office.

### ADDITIONAL INFORMATION

Please note: if your child was not baptized at St. Blaise, and you have not already supplied us with a copy of your child's baptismal record, you will need to supply a copy for our files. The church where the baptism was held can fax the record over to our office at 508-966-0310. If you need assistance with this please contact Paula at the office, [paulanieva@saintblaise.org](mailto:paulanieva@saintblaise.org).

Confirmation Co-Ordinators/Teachers: Mr. Joshua Whelan, [jwhelan@saintblaise.org](mailto:jwhelan@saintblaise.org)

Mrs. Jennifer Whelan, [jladam10@gmail.com](mailto:jladam10@gmail.com)