CONFIRMATION ENROLLMENT FORM

Please return to Prince of Peace Lutheran Church by Wednesday, September 7, 2016.

General Information

1. Student Name	(first middle last)
Prefers to be called	_Child's email:
	Child's mobile:
2. Date of Birth	School Grade:
3. Date of Baptism	
4. Parent(s) Name(s)	
Address (Street, City, Zip)	
Phone:	(home) (work)
Mobile:	
Email:	(to receive important correspondence)
5. Which worship service do you attend?	5:308:1511:00
 an instrument, intelligence, etc): 7. Student is involved in the following school and/or community activities (e.g.: soccer, hockey, choir, dance, band, drama, etc): 	
	xplain _ Explain
Parental Involvement	
10. I can drive for a carpool If yes, #	of teens What neighborhood?
11. I'm willing to be a Guide Need	
12. I'm willing to help drive/chaperone events	s Need more information
13. I have questions regarding the Confirmat	ion program
14. Would like a pastor to discuss Confirmati	on with my family
*All information of this nature is confidential, but if you would rather discuss any issue personally, please contact Pastor Ballenger 856.983.0607 or email: pastorbrett@popmarlton.org.	

Any questions or concerns can be directed to Pastor Brett (pastorbrett@popmarlton.org) or the Confirmation Ministry Coordinator: Jen DiCostanzo – 856-797-2972 (corelli9@msn.com)