Student's Last Name:_____

St. John the Baptist Parish
Faith Formation Registration
Catholic School Confirmation Year I Student 2025-2026

Father's Name: _____	**Mother's Name:** _____
Address: _____	**Address:** _____
City, Zip: _____	**City, Zip:** _____
Home Phone: _____	**Home Phone:** _____
Cell Phone: _____	**Cell Phone:** _____
Email: _____	**Email:** _____

Emergency Contact: (other than parents) _____/_____/_____
Name Relationship Phone Number

Student Last Name	Student First Name	School Attending 2025-2026	Grade

IMPORTANT INFORMATION

1. **No payment** is due at this time**.**
2. However, your student **is eligible** to participate in Youth Ministry Activities and Service Opportunities prior to beginning classes.
3. Classes will begin in January at the start of the second semester of sophomore year.

REQUIREMENTS PRIOR TO ATTENDING IN-PERSON CLASS *(Information will be emailed to you)*

1. Saint Report will be required in the second semester of freshman year.
2. Sponsor Form will be required at the end of first semester of sophomore year.
3. Consider beginning to fulfill Service Hours requirements (5 hours recommended by the end of Yr I).

_____
Parent Name (printed)

_____Date: _____
Parent Signature

Please return completed form to ffregistration@sjbh.org, bring to the Parish Office or mail to: St. John the Baptist Parish, Attn: Janel Aleson, 2597 Glendale Ave, Green Bay, WI 54313

OFFICE USE:
SJB Mem: ____ FN:____
Staff Initials: ____