



PERLEY LUTHERAN PARISH

Kirkebo Lutheran Church • Nora Lutheran Church

Confirmation Registration Form for Kirkebo / Nora

(circle location)

Child #1:

Name Printed

M/F Grade Fall '22 _____ Age: _____

Date of Birth: _____

Baptismal Date: _____

Allergies/Health Concerns:

Student's Cell # _____

Child #3:

Name Printed

M/F Grade Fall **22 _____ Age: _____

Date of Birth: _____

Baptismal Date: _____

Allergies/Health Concerns:

Student's Cell # _____

Child #2:

Name Printed

M/F Grade Fall '22 _____ Age: _____

Date of Birth: _____

Baptismal Date: _____

Allergies/Health Concerns:

Student's Cell # _____

Student's address:

Street: _____

City: _____

State: _____ Zip: _____



Parent/Guardian Information:	
Parent#1 _____ (name)	Parent # 2 _____ (name)
Relation to child: _____	Relation to child: _____
Email: _____	Email: _____
Phone: _____	Phone: _____
Cell: _____	Cell: _____
Check here if you are able to receive text messages <input type="checkbox"/>	Check here if you are able to receive text messages <input type="checkbox"/>
Check here if you can help with teaching/events: <input type="checkbox"/>	Check here if you can help with teaching/events: <input type="checkbox"/>