

## CONFIRMATION ENROLLMENT FORM

**2010 – 2011 : WEDS. 7:00 - 8:30 PM**

*Please use a separate form for each child*

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

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

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

*First Name                      Maiden Name                      Last Name*

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

*Street Address                      City                      Zip Code*

Phone Number: (\_\_\_\_) \_\_\_\_\_

Parent's Email: \_\_\_\_\_

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

First or second year Confirmation student: \_\_\_1<sup>st</sup> or \_\_\_2<sup>nd</sup> \_\_\_

Any Allergies? \_\_\_\_\_

### **MEDIA RELEASE**

I give permission for my child to be photographed, and/or video/audio taped at King of kings Lutheran Church or at events sponsored and/or approved by King of kings. I understand that these photos or video/audio tapes may be used for instructional purposes, such as staff training, conference presentations, and/or general use by the children, and staff throughout the church. These photos may also be displayed on bulletin boards at King of kings Lutheran Church, on the King of kings' web page or in flyers or brochures promoting the church or our youth and/or children's programs.

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*Parent/Guardian Signature*

*Date*