

Bethlehem Lutheran Church
2009-2010
10th Grade Confirmation Registration

(Check One) Wednesday Sunday

Name (First, Middle, Last) _____

Parent(s) or Guardian(s) _____

Address _____

Email Address _____ Home # _____

Cell Phone(s) (Name & Number) _____

School _____ Birthday _____

Mentor's Name _____

Mentor's Phone # _____ Mentor's Cell # _____

Mentor's Address _____

Mentor's Email Address _____

Mentor's Occupation _____

Mentor's Place of Worship _____