

CONFIRMATION CANDIDATE

10TH GRADE

The Church of the Holy Spirit

REGISTRATION FORM

Fall 2009-2010

PARENT/GUARDIAN _____

MAILING AND STREET ADDRESS _____

CITY _____ ZIP _____ HOME PHONE _____

EMERGENCY NAME & PHONE _____

(Other than the parent, in case of illness or accident)

EMAIL ADDRESS _____

10TH GRADE CLASSES MEET ON WEDNESDAY EVENINGS AT 6:30 PM

STUDENT NAME	BIRTHDATE	GRADE	SPECIAL INFORMATION
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I / WE CAN VOLUNTEER IN THE FOLLOWING AREAS

_____ R.E. Office Aide _____ Driver for Fieldtrips

REQUIREMENTS FOR ENROLLMENT

_____ *Parish Family Registration*

_____ *Baptismal Certificate*

_____ *Verification of VIRTUS Training*

_____ *Diocesan Code of Ethical Standards for Volunteers*

_____ *Diocesan Policy of Suspected Abuse of Children*

_____ *Fees must accompany enrollment form. **\$25.00 per student, Capped at \$75.00***

_____ Cash _____ Check#

Handbook is located online @ www.holyspiritwichita.com