



Brooklyn United Methodist Church
2011 - 2012 Confirmation Registration
Program Cost: \$100.00 (Payable to: BUMC)

Office Use Only:	
Check #: _____	Cash: _____
Amount received: _____	
Date received: _____	

Student's Full Name: _____ Grade (as of Fall 2011): _____

Student's Email: _____ Birth Date: _____

Baptism Date: _____ Student has received Communion: Yes or No

School Attending: _____

Student Interests (sports, talents, extracurricular activities, etc.) _____

Parent(s)/Guardian(s) Name(s): _____

Address: _____ City: _____ State: _____

Phone: (H) _____ (W) _____

(C) _____ (C) _____

Parent(s)/Family Email: _____

Is there any special need we should be aware of for your son/daughter?

The following information is for the purpose of supporting you and your son/daughter this year in Confirmation. No student will be excluded from the Confirmation program based upon responses. All scholarship requests are kept confidential and the Director of Youth Ministries, Anne Jackson will contact families in regards to their individual needs.

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| ❖ Is your family a current member of Brooklyn United Methodist? | Yes or No |
| ❖ Has the student been attending worship regularly? | Yes or No |
| ❖ Is financial scholarship support needed? | Yes or No |
| ❖ Does the student need a NRSV Student Study Bible | Yes or No |

As an active participant in the Confirmation Program I commit to participate fully in the Confirmation program, Christian Worship, and the life of the congregation at Brooklyn United Methodist.

Student's Signature: _____ Parent Signature: _____