



## CONFIRMATION REGISTRATION SHEET

Name of Child \_\_\_\_\_

Date of Birth \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Cell # \_\_\_\_\_

Birth Place \_\_\_\_\_

### NOTE:

- ✓ Classes Will be once a month on a Saturday  
From 10am to 2pm. (6 Saturdays)
- ✓ Parents and children are to attend mass for the following months  
while Getting prepare for communion
- ✓ Donation \$ 300.00

**Santa Cruz Resurrection Episcopal Church**  
11173 Griffing Boulevard Biscayne Park, FL 33161  
Tel: 305.893.8523 Email: [info@santacruzresurrection.org](mailto:info@santacruzresurrection.org)