

**8<sup>th</sup> Grade & Confirmation & RCIT Registration**  
**Wednesday 7:00PM – 8:30PM**

Student's Name: \_\_\_\_\_  
(First) (Middle) (Last)

Address: \_\_\_\_\_  
(Street) (City / Zip)

Date of Birth: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Student's Cell Phone \_\_\_\_\_ Student's Email Address \_\_\_\_\_

May we text message student? Y N

Home Phone: \_\_\_\_\_ Family Email Address: \_\_\_\_\_

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

Was this student enrolled in Religious Education last year? Y N Where: \_\_\_\_\_

Has this student been Baptized? Y N When: \_\_\_\_\_ Church: \_\_\_\_\_

Has this student received Reconciliation? Y N When \_\_\_\_\_ Church: \_\_\_\_\_

Has this student received First Communion? Y N When \_\_\_\_\_ Church: \_\_\_\_\_

Health Concerns or Allergies: \_\_\_\_\_

**Religious Education fees apply.**

I, \_\_\_\_\_, legal guardian of the above student, give permission for his/her photograph and/or information to be used on the St. Mark's website and/or bulletin.

\_\_\_\_\_  
(Signature)

**\*\*PLEASE ATTACH A COPY OF THE BAPTISMAL CERTIFICATE\*\***