



Confirmation Registration Form
8th GRADE
Confirmation Program 2020 - 2022

Please include a copy of your baptismal certificate with this form. If you were baptized at St. Walburga or St. Martin, please indicate it on this form, you won't need to present a certificate.

(Please print or type)

Name of Teen Candidate: _____

Father's Name _____

(First/Last)

Mother's Name _____

(First/Maiden/Last)

E-Mail(s): _____

Please include all you want updates to be sent to.

Telephone: (Home) (____) ____ - ____ (Mother) (____) ____ - _____

(Father) (____) ____ - _____

Date of Birth ____/____/_____

Church/City/State of Baptism _____

Date of Baptism ____/____/_____

Received First Reconciliation and First Communion _____ (Y/N) if yes:

Where _____ (Church Name/City/State)

School _____ Year of Graduating Class _____

Return this form before 8/1/2020 with the registration fee of **\$100.00** Payable to:
Mary Queen of Peace. Please return to parish office or drop in the collection.

Mary Queen of Peace
Attn: Cyndi Stifter
21304 Church Avenue
Rogers MN 55374



Over

VISUAL LIKENESSES AND ORIGINAL WORKS OF MINORS

I authorize and consent that Mary Queen of Peace and the Archdiocese of Saint Paul and Minneapolis be permitted to use and publish for general communications, advertising, commercial or publicity purposes, or for any other lawful purpose whatsoever the likeness of My Child and My Child's original work, including video, photographic portraits, pictures, or reproductions, made through any medium, including social or other electronic media, in accordance with the Acceptable Use Policy for Electronic Communications and the Social Media Policy, **provided only the first name (not the family name) is identified if any name is used.** I hereby release Mary Queen of Peace, the Archdiocese of Saint Paul and Minneapolis, and anyone authorized by Mary Queen of Peace or Archdiocese of Saint Paul and Minneapolis with such use.

This consent regarding My Child's likeness or original work is valid for one year.

If I choose to rescind my authorization and consent, I agree that I will inform Mary Queen of Peace in writing and that my rescission will not take effect until it is received by Mary Queen of Peace. I understand however that it may not be possible to recall any work or photos that have been published prior to receipt of my written rescission.

I have read the above Disclosures, Authorizations, and Releases, have had the opportunity to consider their terms, and understand them. I execute this document voluntarily and with knowledge of its significance.

Student's Name (please print) _____

Parent/Guardian Name (please print) _____

Address _____

Email Address _____

Phone Number _____

Signature of Parent/Guardian _____

Date _____