



Our Savior's Lutheran Church
Spearfish, SD

Student's Name: _____ Grade: _____

Address: _____

Birth Date: _____ Baptism Date: _____

Baptism Sponsors: _____

Parent(s) Name: _____

Home Phone: _____ E-mail address: _____

Dad's Work Phone: _____ Mom's Work Phone: _____

I give permission for my child to go on Confirmation outings with his/her adult guide.

Parent's Signature: _____

Date: _____

<p>Registration Fee \$30</p> <p>Check _____</p> <p>Cash _____</p> <p>Date _____</p>
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