

**Grace Lutheran Church**  
**Lutheran Discipleship Enrollment Form 2018-2019**

Student's Full Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First Middle

Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_      Baptismal Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student's Address: \_\_\_\_\_ Male  
\_\_\_\_\_ Female

Student Lives with:      Father      Mother      Both      Other: \_\_\_\_\_

Home Phone #: \_\_\_\_\_      Parent E-mail: \_\_\_\_\_  
Where to e-mail all information about confirmation and student's progress

Home Church: \_\_\_\_\_

Student's School: \_\_\_\_\_

Year in School: \_\_\_\_\_ (2018-2019)      Year in Confirmation Program:    1    2    3

Confirmation Session Signing Up For:    \_\_\_ Sunday Evenings    \_\_\_ School Day    \_\_\_ Both

High School Attending (If Known): \_\_\_\_\_

Parent Information

Marital Status:  Married     Divorced     Widowed     Separated     Remarried     Single

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

\*\*\*\*\* PARENT INFORMATION IF DIFFERENT FROM STUDENT\*\*\*\*\*

Father/Step-Father/Guardian

Mother/Step-Mother/Guardian

\_\_\_\_\_ Street

\_\_\_\_\_ Street

\_\_\_\_\_ City/Zip

\_\_\_\_\_ City/Zip

\_\_\_\_\_ Home Phone      \_\_\_\_\_ Home Church/Denomination

\_\_\_\_\_ Home Phone      \_\_\_\_\_ Home Church/Denomination

Employment Information

\_\_\_\_\_ Father/Step-Father/Guardian Employer

\_\_\_\_\_ Mother's/Step-Mother's Employer

\_\_\_\_\_ Father's Work Phone      \_\_\_\_\_ Cell Phone

\_\_\_\_\_ Mother's Work Phone      \_\_\_\_\_ Cell Phone

Emergency Information Form Has Been Returned:    Y    N

\_\_\_\_\_ Parent/Legal Guardian Signature      \_\_\_\_\_ Date