

Youth Confirmation Registration Form

Forms can be mailed to:

Kellie Herdade

Christ Church Cranbrook

470 Church Road

Bloomfield Hills, MI 48304

(Please Print AND Fill Out Completely)

CANDIDATE'S NAME _____
(First) (Middle) (Last)

ADDRESS _____
(Number) (Street)

(City) (State) (Zip Code)

PHONE _____ EMAIL _____

CELL PHONE _____ EMAIL _____
(If applicable)

DATE OF BIRTH _____
(month/day/year)

PLACE OF BIRTH _____
(City) (State)

DATE OF BAPTISM _____

(month/day/year)

PLACE OF BAPTISM _____

(Church Name)

(Denomination)

(City) *(State)*

FATHER'S NAME _____

(First)

(Middle)

(Last)

MOTHER'S NAME _____

(First)

(Maiden)

(Last)

PARENT SIGNATURE: _____ DATE: _____

*If you have any questions, please contact
Kellie Herdade at kellie@christchurchcranbrook.org*