

**QUEST CONFIRMATION REGISTRATION FORM 2018-2019**

**PLEASE COMPLETE THIS FORM AND RETURN IT TO THE PARISH OFFICE  
BEFORE SATURDAY, SEPTEMBER 1, 2018**

**PLEASE PRINT**

**GRADE (circle): 9 10 11 12**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Parent E-mail:** \_\_\_\_\_

**High School Attending:** \_\_\_\_\_

**Date of Birth (MM/DD/YYYY):** \_\_\_\_\_

**Date of Baptism (MM/DD/YYYY):** \_\_\_\_\_

**Parish of Baptism:** \_\_\_\_\_

*Include city and state*

**Note:** If not baptized at SFX, please provide a copy of your Baptism Certificate.

**Father's Name:** \_\_\_\_\_

**Mother's Name (include maiden name):** \_\_\_\_\_

**Sponsor's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**TO BE COMPLETED BY PARISH OFFICE:**

**Registration Fee (\$45) Paid on:** \_\_\_\_\_