

St. Roman & St. Charles Borromeo
Collaborative Faith Formation Program 2026-2027
Confirmation (11th-12th)
Registration Form

St. Roman Parish
1710 W. Bolivar Ave.
Milwaukee, WI 53221

St. Charles Borromeo
5571 S. Marilyn St.
Milwaukee, WI 53221

Parish member of: ☐ St. Charles Borromeo ☐ St. Roman ☐ Other:

Date:

STUDENT INFORMATION

First Name:

Middle Name:

Last Name:

Please check one:

☐ **Male**

☐ **Female**

Date of Birth:

School Attending:

Grade as of 9/1/2026:

Student E-mail:

Student Cell:

T-shirt Size:

☐ XS

☐ S

☐ M

☐ L

☐ XL

☐ Other:

SACRAMENTS RECEIVED

Baptism:

☐ Yes

☐ No

Church of Baptism:

1st Communion:

☐ Yes

☐ No

Reconciliation:

☐ Yes

☐ No

PARENT/GUARDIAN INFORMATION

Father's First Name:

Last Name:

Religion:

Address:

City:

State:

Zip Code:

Cell (Father):

E-mail (Father):

Mother's First Name:

Last Name:

Religion:

Address:

City:

State:

Zip Code:

Cell (Mother):

E-mail (Mother):

Student resides with: ☐ Both parents ☐ Mother only ☐ Father only ☐ Both parents (Separate Homes) ***Please list separate addresses under Parent Information**

Send mail to: ☐ Both parents ☐ Mother only ☐ Father only ☐ Both parents (Separate Homes)

Language spoken at home: ☐ English ☐ Spanish ☐ Other: _____

FOR OFFICE USE ONLY: ☐ 11th Gr ☐ 12th Gr



CONFIRMATION PREPARATION CYF PROGRAM FEES

Confirmation Preparation Fee (per student)	\$120.00
Confirmation Retreat Fee (per student)	\$150.00

CONFIDENTIAL INFORMATION

The purpose of gathering this information is in the event of needing to be sensitive towards your family and your child/ren.

Parent's Marital Status: ☐ Married ☐ Separated ☐ Divorced ☐ Single ☐ Widowed

Interpreter is needed for:

Are there any physical, sensory, emotional, learning disabilities, or any other special needs?

Student Name: Please List:

Are there any medications or medical conditions, such as allergies, diabetic needs, or Epi-Pen?

Student Name: Please List:

ADDITIONAL NOTES:

- ☐ A non-refundable deposit of \$50.00 per student is due upon registration. This deposit will be credited towards the total tuition. Please make checks payable to St. Charles Borromeo Parish.
- ☐ All registrations must include a copy of the student's **baptismal certificate**.
- ☐ **PLEASE NOTE:** Students must be enrolled in either a **Catholic** Formation Program or a **Catholic** High School prior to enrolling in the immediate Confirmation Preparation Program.
- ☐ Excessive absences result in difficulties in making up missed material. Students are permitted up to **three excused absences**. After the fourth absence, the student will need to repeat the formation year.

SIGNATURE OF PARENT OR GUARDIAN

Signature

Date:

FOR OFFICE USE ONLY

Student Name:

Date:

OCIA Candidate: ☐ Yes ☐ No

Date:

Sacrament Needed: ☐ Baptism ☐ Communion ☐ Reconciliation ☐ Confirmation

Date:

Copy of Baptismal Certificate on file at CYF office:

Date:

AMOUNT REC'D	CASH/CHECK	DATE	BALANCE