



# Beverly Catholic Collaborative Religious Education Program

## 2025-2026 Confirmation Registration Form

### Confirmation Candidate:

Full Name \_\_\_\_\_ (please, no nicknames or diminutives)

Home Parish: Please Check ONE

\_\_\_ St. John the Evangelist \_\_\_ St. Margaret of Scotland \_\_\_ St. Mary Star of the Sea

School \_\_\_\_\_ Grade \_\_\_\_\_

DOB \_\_\_\_\_

Date of Baptism \_\_\_\_\_ Please provide a copy of the Baptism Certificate if not baptized in one of the parishes of the Collaborative

Church of Baptism \_\_\_\_\_

City/State \_\_\_\_\_

### Parent Information

Father's Full Name / Mother's Full Name

\_\_\_\_\_

Mother's maiden name required for church records \_\_\_\_\_

Address \_\_\_\_\_

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

Home # \_\_\_\_\_ Cell \_\_\_\_\_ Cell \_\_\_\_\_

Father Email Address \_\_\_\_\_ Mother Email Address \_\_\_\_\_

Emergency Contact (name, email and phone #):

\_\_\_\_\_

Please list any information that will be helpful to us, i.e. health problems, learning needs, allergies, etc. \_\_\_\_\_

\_\_\_\_\_



## REGISTRATION

Tuition: \$125.00 per candidate

Amount due: \_\_\_\_\_ Amount paid \_\_\_\_\_

Payment Plan: \_\_\_\_ monthly \_\_\_\_ quarterly \_\_\_\_ financial assistance requested

**Make checks payable to the parish you checked as your home parish.**

Mail payment with the Registration form to: Beverly Catholic Collaborative Office

Attn: Religious Education

552 Cabot Street

Beverly, MA 01915

Confirmation Schedule:

Classes will meet twice a month on Sunday afternoons at St Mary Convent. Please see the parents' letter for a schedule of meeting dates.

Grades 8 and above meet from 1:00-2:30pm

I understand that, as a participant in religious education, my child(ren) may be photographed / videotaped during religious education activities. I understand that these may be used in Parish presentations and promotional material. I release St. Mary Star of the Sea, St. John the Evangelist, and St. Margaret Parishes from any and all liability.

Please initial your wishes: \_\_\_\_ I give permission / \_\_\_\_ I do not give permission This would include the Confirmation Ceremony/Mass.

As a legal parent/guardian of this Confirmation Candidate, I confirm that I have read and answered all of the information on this form honestly and accurately to the best of my ability.

Parent's Signature / Date: \_\_\_\_\_