



Martin Luther
Evangelical
Lutheran
Church

Vicar Silke Fahl, vicarfahl@martinluther.ca
Cell (416) 567-2487, Office (416) 251-8293
2379 Lakeshore Blvd. West, Toronto M8V 1B7
More information: www.martinluther.ca

CONFIRMATION REGISTRATION

Family Name/Familiename **Given Name of Child/Vorname des Kindes**

Date of Birth & Age / Geburtsdatum & Alter **Place of Birth/Geburtsort**

Date of Baptism / Taufdatum **Place of Baptism/Taufort**

School/Schule **Grade/Klasse**

Health and Dietary Notes, Medications/ Gesundheits- und Ernährungshinweise, Medikamente:

Can swim/ Kann schwimmen: **Yes/Ja** _____ **No/Nein:** _____

Other information or requests/Weitere Informationen oder Wünsche:

Street Number	Street	Apt. #	City	Postal Code
Hausnummer	Strasse	Apt. #	Stadt	Postleitzahl

Home Telephone Number/ Festnetz- Telefonnummer **Cell Number/Handynummer**

Email Address/E-Mail Adresse

Mother/Mutter, Church Denomination/Konfession **Cell Number/Handynummer**

Father/Vater, Church Denomination/Konfession **Cell Number/Handynummer**



Martin Luther
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Pastor Christian Ceconi, pastor@martinluther.ca
Cell (416) 567-2487, Office (416) 251 8296
2379 Lakeshore Blvd. West, Toronto M8V 1B7
More information: www.martinluther.ca

Person to contact in case parents (guardians) cannot be reached / **Phone Number / Telefonnummer**
Zu kontaktierende Person, falls Eltern (Erziehungsberechtigte) nicht erreichbar sind

Names of Godparents/Namen der Paten:

_____, City _____

_____, City _____

As parents / guardians of _____ we consent to the participation of the above mentioned child in all the Confirmation activities. Should it be necessary for our child to receive medical attention, we authorize the staff members in charge to act as they deem necessary. Any cost so incurred will be our responsibility. Should we become aware of a change in our child's medical condition; we will notify the staff immediately. Furthermore, in case of an accident or mishap, we absolve Martin Luther Church, the Pastor and the Staff of all responsibility.

Place, Date/Ort, Datum

Signature of Parent(s)/Unterschrift(en) der Eltern

Please confirm attendance on the following dates:

- Sunday September 27, 2020, English-German Service at 11:00 am to welcome new Confirmands
- October 17, 2020, Class
- November 13-15, 2020, Weekend Retreat (To Be Confirmed, alternate of only November 14.)
- December 20 and 24, Advent 4 and Christmas Eve Services
- January 16, 2021, Class
- February 19-21, 2021, Weekend Retreat (To Be Confirmed, alternate of only February 20)
- March 27-28, 2021, Class
- April 1-4, Holy Week Services
- May 1-2, 2021, Class
- May 23, 2021, Confirmation Service at 11:00 am on Pentecost

FOR OFFICE USE ONLY

Prepared by / Bearbeitet von: _____

Date/Datum: _____

Certificate of Membership Received from Godparents?