### Blessed Sacrament Catholic Church Sacrament of Confirmation Registration Form

#### Please print clearly (This information will be used for the child's certificate)

	Last	Fir	st	Middle		
Place of Birth		Date of Birth State Month Day Year				
(	City	State		Month Day Year		
Age Grad	le					
	ed at Blessed Sac	rament in Cocoa Florid		aptismal Certificate. If you eed a copy of the Baptismal		
Church of Baptism	۱					
Place of Baptism_						
	City	State	9	Zip		
Date of Baptism _						
	Month	Day	Year			
Confirmation name	e chosen:					
Sponsor's name:						
<b>.</b>						
Sponsor's address	s and phone numb	er:				
				Religion		
Father's Name	Last	First		Religion		
Father's Name	Last	First				
Father's Name Mother's Name	Last	First		Religion		
Father's Name Mother's Name	Last	First		Religion		
Father's Name Mother's Name Working E-mail Ac	Last Last ddress	First		Religion		
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Father's Name Mother's Name Working E-mail Ac Current Address _ Please check one: The annual regi	Last Last ddress	First First both parents	mothe	Religion		
Father's Name Mother's Name Working E-mail Ac Current Address _ Please check one: The annual regis children. Pay	Last Last ddress child lives with stration fee is: \$40 yments may be ma	First First both parents	mothe	Religion Religion erfather erfather		

Second Payment: Date Received:	Amt Paid \$	Cash/Check #	BAL Due \$	Staff Initials:
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#### DIOCESE OF ORLANDO PERMISSION FORM AND RELEASE OF LIABILITY FOR BLESSED SACRAMENT CHURCH

I am the parent/guardian of \_\_\_\_\_\_ give my permission for my child to attend Religious Education classes on Blessed Sacrament Church property. By granting permission, I also waive any claims against, and release and hold harmless, Blessed Sacrament Church, the Diocese of Orlando, and any of their religious, employees, volunteers, agents and representatives, from any harm that occurs to my child while participating in Faith Formation classes at Blessed Sacrament.

In the event my child requires medical treatment or transportation for medical care, Blessed Sacrament Church will attempt to contact me at the number(s) listed below. If they are unable to reach me, Blessed Sacrament may contact the designated emergency contact at the number(s) listed below. If the chaperones, volunteers, or other adult supervisors are unable to reach the designated emergency contact, I authorize them to take appropriate measures to provide care and treatment for my child, to transport my child the nearest emergency room or physician's office, or to call an emergency paramedic ambulance service.

Parent/Guardian's Signature	Date		
Parent/Guardian (Print Name)	Emergency contact (Print Name)		
Phone Numbers:	Phone Numbers:		
Home:	Home:		
Cell:	Cell:		
Work:	Work:		

MEDICAL INFORMATION: Please provide any additional, specific information about your child that you feel we need to know.

Child's Name:
Allergies:
Chronic or Acute Illnesses:
Medication Presently Being Taken:
Other Facts We Should Know

I acknowledge that all of the information provided is true and correct and will only be disclosed to the volunteers, or other adult supervisors and any medical providers as needed.

Parent/Guardian Signature

Date

## **BLESSED SACRAMENT CHURCH** – Confirmation Information

#### To the Confirmation Candidate:

Confirmation is the Sacrament of responsibility. You are taking responsibility for **vour** faith. Your regular and on-going participation will show your commitment to receiving this Sacrament. The Confirmation Preparation Process is a unique opportunity to get in and explore the Catholic Faith, ask questions, and seek God. Each step in the process is an opportunity to get in and meet God in a different way. Please take this time seriously and commit to the process.

- 1. Obtain a recent copy of your Baptism Record. If you were not baptized at Blessed Sacrament Church, you should write or telephone the Parish where you were baptized. Give them your name, your father's name, mother's first and maiden name, and the approximate date on which you were baptized. They will mail you a copy of the record.
- 2. Choose a Sponsor for Confirmation. As Confirmation is the completion of Baptism, the Liturgy of confirmation is patterned after the Baptismal Liturgy. Your sponsor will present you to the bishop or Celebrant when you step forward to be confirmed. You are encouraged to choose one of your Baptismal Godparents for this role. If that is not possible, choose someone whom you consider to be a role model for living the Catholic faith.
- 3. Choose a name for confirmation. It is most appropriate to use your Baptismal name, if you were given a Saint's name at birth. Otherwise, you may choose the name of a saint whom you admire. There are a large number of books available which will give you information about the lives of the Saints. If you have Internet access, you can find biographies of many saints.
- 4. Practice the Catholic Faith. This includes regular participation at Sunday Liturgy, daily prayers and making a sincere effort to grow in that faith through your participation in instruction for receiving the Sacrament of confirmation.
- 5. You are encouraged to participate in the Sacrament of reconciliation before celebrating your Confirmation.

# **SPONSOR INFORMATION:**

The role of the sponsor is to pray and intercede for the youth and be a role model by answering questions, introducing different aspects of the Catholic Faith, and sometimes participating in certain components of the preparation process.

- --A sponsor must be a Catholic who actively practices the faith.
- --A sponsor must be at least 16 years old and already Confirmed.
- --A sponsor may not be a parent of the candidate.
- --A sponsor need not be the same gender as the candidate.

Dear Parents,

Our parish is holding the *Learning about L.I.F.E. - Love, Infatuation, Friendship, and* Exploitation. The Learning about L.I.F.E. program was designed by Sister Kieran Sawyer and Dr. Kathie Amidei, both nationally recognized leaders in the field of youth catechesis and family faith formation. The program responds to a mandate from the United States Conference of Catholic Bishops: the 2002 Safe Environment mandate that requires that all children be helped to recognize and protect themselves from abusive relationships.

Each session is scheduled for the children of a specific age group and will last approximately 30 minutes. Parents are required to attend the session with their child. During the sessions I will be discussing relationships that are positive and loving as well as those that may be negative and abusive. The sessions will focus on helping the children determine what would be a safe relationship and who they should turn to if they are uncomfortable.

> Kindergarten - September 30, 2018 1<sup>st</sup> and 2<sup>nd</sup> Grade - October 21, 2018 3<sup>rd</sup> and 4<sup>th</sup> Grade - January 20, 2019 5<sup>th</sup> and 6<sup>th</sup> Grade - February 17, 2019 7<sup>th</sup>, 8<sup>th</sup> and 9<sup>th</sup> Grade - March 10, 2019

If you do not want your child to attend a session, please check the box and sign the form below and return to me. If they <u>are</u> attending the session, please sign and return the form to me. Thank you.

Sincerely,

Darlene Wegner **Director of Religious Education** Blessed Sacrament Church

I do not want my child to attend the L.I.F.E. session.  $\square$ 

Student's Name\_\_\_\_\_ Date\_\_\_\_\_

Parent's Signature\_\_\_\_\_