



Saint Jerome Catholic Church

Candidate Name: _____

Confirmation Year: 2

Completed Today:

_____ Registration Packet

- Registration Form
- Image Release Form
- Activity Permission Form
- Candidate Pledge
- Parent Pledge

_____ Virtus Teaching Touching Safety Permission Slip

_____ Entrance Interview Sign-Up

_____ Parent Volunteer Hours Sign-Up

_____ Year 1 Retreat Interest Sign-Ups

_____ Deposit OR _____ Full Payment

Completed at a Later Date:

_____ Baptism Copy (due at Entrance Interview)

_____ First Communion Copy (due at Entrance Interview)

_____ Sponsor Form (due March 2021)

_____ Service Hour Form (20 hours due May 2021)



St. Jerome Catholic Church Confirmation

Student First and Last Name: _____ ☐ M ☐ F

Date of Birth: _____ City of Birth: _____

Baptism Date: _____ Parish Name: _____

1st Communion Date: _____ Parish Name: _____

Home Address: _____

Mother's/Guardian Full Name: _____

Mother's/Guardian Cell Phone: _____

Mother's/Guardian Email: _____

Father's/Guardian Full Name: _____

Father's/Guardian Cell Phone: _____

Father's/Guardian Email Address: _____

Emergency Contact: _____ Phone Number: _____

T-Shirt Size: _____ School: _____ Grade _____

After school activities: _____

Health Conditions/Allergies: _____

I wish to receive email and/or text message updates/reminders from St Jerome Parish and the Little Saints Program using www.flocknote.com

☐ Text Only ☐ Email Only ☐ Both Text and Email

Signature: _____

Office use only:

Name of Cashier: _____

☐ Cash ☐ Check ☐ CC ☐ Full Amount ☐ Deposit ☐ Other

I, (print name) _____, promise to make monthly payments of \$ _____ for _____ months (max 9 months) to be PAID on the 15th of the month. If I fail to make a payment, I agree to pay a late fee of \$5. If I pay by Credit Card, I agree to a 3% convenience fee, if I pay by check, I agree to pay a \$25 returned check fee if any of my checks are returned by the bank.

Customer signature: _____

**By signing you agree to these terms as stated above

PARENT'S AUTHORIZATION TO USE CHILD'S IMAGE, NAME, VOICE AND/OR WORK FOR NON-COMMERCIAL PURPOSES

This section to be completed by Archdiocese/School/Parish

Archdiocese/School/Parish: St Jerome Catholic Church

Class/Activity: Youth Ministry Events/ Parish Events

The Archdiocese/School/Parish intends to use your child's image, name, voice and/or work for the following non-commercial purposes (describe class/activity, date(s) if applicable): Bulletin, Website, or Advertising Materials

The following person(s)/entity not connected to the Archdiocese/School/Parish will be involved in the class/activity:

This section to be completed by Parent/Legal Guardian:

I, _____, am the parent or legal guardian of _____ (child's name), a minor (age: _____). I hereby authorize the Archdiocese/School/Parish to use the following personal information about my child:

Please initial the applicable boxes

Image/visual likeness: ☐ yes ☐ no
Name: ☐ yes ☐ no

Voice: ☐ yes ☐ no
Work: ☐ yes ☐ no

I understand and agree that my child's image, name, voice and/or work (the "Personal Information") will be used for the particular reasons identified above. I further understand and agree that the Archdiocese/School/Parish may use the Personal Information for other non-commercial purposes, including, but not limited to, publicity, exhibits, electronic media broadcasts or research. I understand and agree that the Personal Information, photographs or electronic recordings of my child may be copied, edited and distributed by the Archdiocese/School/Parish in publications, catalogues, brochures, books, magazines, exhibits, films, videotapes, CDs, DVDs, email messages, websites, or any other form now known or later developed (the "Materials").

The Archdiocese/School/Parish may use the Personal Information at its sole discretion, with or without my child's name or with a fictitious name, and with accurate or fictitious biographical material. The Archdiocese/School/Parish will not use the Personal Information for improper purposes or in a manner inconsistent with the teachings of the Roman Catholic Church.

I waive any right to inspect or approve any Materials that may be created using the Personal Information now and in the future. While the Archdiocese/School/Parish will take care to maintain the particular intents and purposes of the photographs or electronic recordings, editing may be necessary to obtain the best results. I release and discharge the Archdiocese/School/Parish and its employees and agents from any liability that may arise out of the making or editing of the photographs or electronic recordings, including but not limited to, distortion, blurring, alteration, optical or auditory illusion or use in composite form.

In exchange for the Archdiocese/School/Parish's giving my child an opportunity to participate in the class/activity, I hereby agree that neither I, nor my child, will receive monetary compensation, royalties or credit for use of the photographs or electronic recordings by the Archdiocese/School/Parish. I understand and agree that the Archdiocese/School/Parish shall be the owner of all right, title and interest, including copyright, in the photographs, electronic recordings and Materials. If the Archdiocese/School/Parish intends to use the Materials for a commercial purpose, I will be provided at that time with information about the terms of the commercial use.

I hereby waive, release and forever discharge any and all claims, demands, or causes of action against the Archdiocese/School/Parish and its employees, agents, contractors and any other person, organization, or entity assisting them with the photography, electronic recording or Materials, for damages or injuries in any way related to, or arising from the photography, electronic recording or Materials, or the use of the Personal Information, and I expressly assume the risk of any resulting injury or damage.

I further understand and agree that this Authorization remains in effect until it is withdrawn in writing. I understand that if I change my mind about this Authorization, that I will submit another, new authorization form to the Archdiocese/School/Parish. However, my new authorization will not have the effect of revoking this Authorization, and the Archdiocese/School/Parish will have no duty or obligation to make any changes or alterations to any Materials that may have been prepared based on this Authorization.

I represent that I have read this Authorization, understand the contents and am able to grant the rights and waivers it contains. I understand that the terms of this Authorization are contractual and not mere recitals. I am signing this document freely and voluntarily.

Signature: _____

Date: _____

Print Name: _____ Relationship to Child: _____

Address: _____ Telephone: _____



STUDENT AND YOUTH ACTIVITY PERMISSION FORM

School/Parish/Other Archdiocesan Sponsoring Entity ("Location"): St Jerome Parish

Place of Event/Trip: Youth Ministry Events, Church or school property during the 2020-2021 School Year

Activity: Field Trip ☐ Retreat ☐ Other (specify) All events at St Jerome Purpose: Confirmation Preparation

Description of Activity: Classes, service projects, church events, life nights, day retreats, etc See Attached: ☐

Mode of Transportation: Walk ☐ Car Pool ☐ Bus ☐ Other (specify) parent/guardian drop off

Teacher/Adult Leader: Ijeoma Oti Attire: Modest/ appropriate for events

Minor's Name: _____

Address: _____

Date of Birth: _____ Male ☐ Female ☐ Grade _____

I request that my child be permitted to participate in the above activity. I am not aware of any physical or medical condition my child has that would prevent my child from participating fully in this activity.

My son/daughter has the following medical needs, allergies or dietary restrictions _____

If my child needs to take medication while participating in this activity, I hereby give my child permission to self-administer his/her medication in accordance with the *Medication Authorization and Permission Form*, and, if my child cannot self-administer, I give permission to the responsible staff members or chaperones to administer or to assist in the administration of my child's medication. I also give permission to the responsible staff members, chaperones, medical practitioners and medical facilities to use their judgement in obtaining and providing medical treatment for my child should it become necessary to do so. I understand that health insurance benefits through the Location, if any, may have limited application, and that I am entirely responsible for the cost of all medical treatment provided to my child. I agree to reimburse the Location for the cost of any medical treatment and related expense incurred.

Release of Liability: As a condition of participating in this activity, I hereby hold harmless, release and discharge The Roman Catholic Archbishop of Los Angeles, a corporation sole, Archdiocese of Los Angeles Education & Welfare Corporation and the Location, their respective agents and employees and any parent/volunteer/chaperone, from any and all liability, loss or claims for personal injuries, wrongful death or property damage that I or my child may suffer as a result of participation in the activity described above.

Parent/Guardian _____ Date _____

Home Phone _____ Cell Phone _____ Work Phone _____

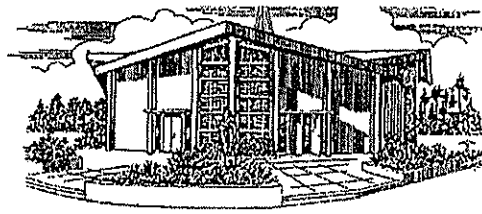
Person to Notify in case of Emergency if Parent or Guardian is unavailable:

Name: _____ Phone: _____

Health Insurance Company: _____ Policy No.: _____

To be filled in by Location

To be filled in by parent/guardian



St. Jerome Catholic Church

***“For I know the plans I have for you, says the Lord, plans for welfare
and not for evil, to give you a future and a hope.” —Jeremiah 29:11***

As a baptized Catholic, I am preparing for reception of the Sacrament of Confirmation, by which I will be more perfectly bound to the Catholic Church and enriched with a special strength of the Holy Spirit to spread and defend the Faith as a witness of Christ.

As a candidate for Confirmation, I promise the following:

- I will approach my Confirmation journey with an open mind and an open heart.
- I will attend and will fully participate in all Life Nights and Decision Point sessions and activities.
- I will be respectful of the leaders and facilitators of the program and show appreciation for their time and effort.
- I will show respect to those in my class who are on the journey with me.
- I will attend Mass every Sundays and on all holy days of obligation.
- I will receive the Sacrament of Reconciliation before my Confirmation.
- I will accept more responsibility in my family, parish, and community by putting my talents and gifts at the service of others.
- I will commit to daily prayer, praying especially for growth in faith, hope, and love.

As I make these promises, I ask God to give me the grace to be open to his plans for my life—plans he reveals to me in prayer, in my talents and aspirations, and in the encouragement of those who know and love me. I place myself in the loving embrace of the Father, Son, and Holy Spirit in asking for help in fulfilling this commitment.

Name of Candidate (Print)

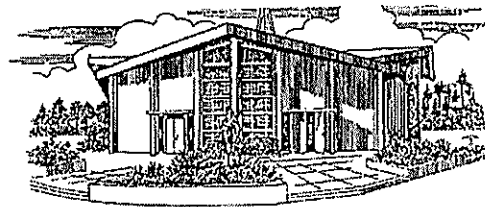
Signature of Candidate

Date

Witnessed by:

Signature(s) of Candidate's Parent(s)/Legal Guardian(s)

Date



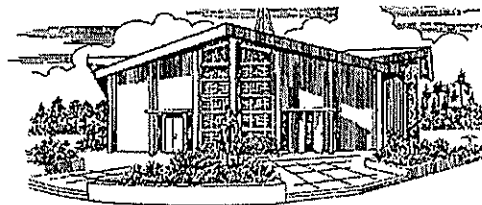
St. Jerome Catholic Church

PARENT PLEDGE

I BELIEVE THAT MY CHILD, _____ IS READY FOR
CONFIRMATION.

- I FULLY UNDERSTAND THE PREPARATION PROCESS AND THE COVENANT.
- THE DIRECTOR AND CATECHIST OF THIS PROCESS WILL HAVE MY COMPLETE COOPERATION AND SUPPORT.
- I WILL HELP MY TEENAGER IN ANY WAY I CAN, AND SEEK HELP WHEN I CANNOT.
- I WILL BE SUPPORTIVE IN SERVICE PROJECTS.
- I WILL ASSIST MY TEENAGER IN CHOOSING A SPONSOR AND WILL ENCOURAGE AND SUPPORT THAT SPONSOR.
- I RECOGNIZE THIS AS A TIME OF RE-COMMITMENT WITHIN OUR FAMILY AND IN MY OWN FAITH LIFE.
- I PRAY THAT THE HOLY SPIRIT WILL GUIDE AND DIRECT US DURING THIS TIME OF PREPARATION.

SIGNATURE: _____ DATE _____



St. Jerome Catholic Church

THE ROLE OF PARENTS IN THE CONFIRMATION PREPARATION PROCESS

As the primary educators of your children, parents, along with sponsors, are to be intimately involved in catechesis for Confirmation. This will help you renew and strengthen your own faith, to set a better example for your children. The parent program is the involvement of parents in the catechetical preparation of their teenager and is an integral part of the Confirmation Process. This preparation process is intended to challenge the candidates to examine their faith life and at the same time it calls parents to conversion and to new growth in faith.

During the course of the year, parents are expected to participate in meetings through volunteering to bring food, donating their time and talent.

As a parent I promise to.... (Please initial each one)

- _____ Attend the Parent and Candidate Meeting for registration
- _____ Volunteer for at least six (6) signups during the year, three (3) per semester (i.e. bringing food, volunteering time)
- _____ Attend Mass Every Sunday and on Holy Days of Obligation
- _____ Be open to the way the Holy Spirit will move in my heart during my child's Confirmation preparation

Participation is intended to help parents:

- Understand their role as models in the Christian development of their son/daughter.
- Deepen their own faith lives by involvement in sessions that relate to specific faith themes and major liturgical rites.
- Strengthen their family relationships and, together, grow in their relationship with God.

Signature: _____ **Date:** _____

**VIRTUS® Teaching Touching Safety: Archdiocese of Los Angeles
"Permission Slip"**

TO: Parents or Guardians

FROM: St Jerome, Confirmation and Youth Program

SUBJECT: VIRTUS® Teaching Touching Safety Program for Children and Young People

DATE SENT: TBD

We at **St Jerome** are committed to your child's safety and well-being. We hear of incidents of child abuse, both sexual and other forms, occurring almost daily in our society. Having the knowledge and understanding to protect and keep ourselves safe is important for children and adults.

The creators of the VIRTUS® Protecting God's Children have developed the Teaching Touching Safety Program, to share with children and young people, God's love for them and their uniqueness and importance in His sight also to assure children, that God desires their happiness, health and safety.

Therefore, the Archdiocese of Los Angeles provides the Teaching Touching Safety program as an ongoing effort to help create and maintain a safe environment for children and youth to be protected from all forms of abuse. The focus of the program is to empower children and youth with knowledge and understanding to keep themselves safe.

This year we will present VIRTUS® *Teaching Touching Safety program* to our students in a class lesson during the month of TBD The topic(s) for this year's lesson(s) include **Boundaries / Bullying and Tell Someone you Trust**. Each lesson includes a "Home Activity," for students to complete with a parent/guardian.

Parents/guardians seeking additional information regarding this program or who would like to review the materials/videos, please feel free to contact Lara Ratleff 213-841-6775

For more information on the VIRTUS® *Teaching Touching Safety* program, you may visit the VIRTUS Online™ website at www.virtus.org.

St Jerome Youth Ministry

Parent Permission Slip for the VIRTUS® Teaching Touching Safety Program

I understand that for my child to participate in the VIRTUS® "Teaching Touching Safety Program" I need to fill out and return this Parent Permission Form by TBD I am specifically requesting that St Jerome present the **Boundaries / Bullying and Tell Someone you Trust** program to my child:

Child's Name: _____

Parent's Name (printed): _____

Parent's Signature: _____

Date: _____

Service is an integral component of the Confirmation preparation process. Through the process, candidates are introduced to the role of service in the life of the faith community and are offered a variety of opportunities to participate in service projects. After participating in these service projects, the candidates are guided in reflecting on these experiences. Here at St Jerome we have a team of adults and teens who will be working to plan and facilitate service projects throughout the year. We will inform the candidates of these opportunities on a monthly basis.

Service Project Log

[illegible]