

St. Pius Youth Ministry

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Confirmation Program

St. Pius Parish is currently taking registration for our Confirmation Program, which will begin on September 20, 2009 and culminate with the sacrament of Confirmation in April or May 2010. The program is open to all sophomores, juniors and seniors in High School who are interested in learning what it means to be fully initiated into the Catholic faith. Detailed information is below and forms are available on our website at www.pius.org. Questions about the program should be directed to Elaine Rachko at 650-365-0140 or by email at elaine@pius.org. Keep an eye on the website at www.pius.org for all confirmation information and updates.

- **FORMS & FEES:** To enroll in the Confirmation process, you must turn in a registration form, copy of your baptismal certificate (if not baptized at St. Pius), and the \$100 registration fee by September 11, 2009. (A retreat fee of \$50.00 is due on or before December 14, 2009.) Money should never be a reason not to sign up and no one will be refused enrollment because of money. (If you cannot afford the fee, please contact Elaine at elaine@pius.org or 650-365-0140.)
- **REQUIREMENTS:** The process of preparation for Confirmation involves a personal desire to participate, a class and mass on Sunday afternoons once per month, a small group meeting once per month, a day-long retreat on Sunday, January 10th, three (3) service projects (see attached schedule), and an entrance and exit interview. Specifics will be discussed at our first meeting for parents and candidates on September 20th.
- **PRE-REQUISITES:** Candidates for Confirmation must have already been baptized and previously received the Sacrament of First Communion (High School age candidates requiring full-initiation can contact Elaine for further information). **It is important that each Confirmation candidate have a basic understanding of what it means to be a Catholic before receiving the sacrament.** At present there are three ways that a candidate may demonstrate a basic understanding of the Catholic faith: 1) Participation in the two-part "Catholicism 101 for High School Teens" (see schedule for times), 2) Completion of the "Know Your Faith" Booklet (available at orientation), or 3) Pass the "Confirmation Readiness" test (can be scheduled at orientation).
- **SPONSOR GUIDELINES:**
Candidates should pick a sponsor prior to the start of the program who meets the following requirements:
 - -Fully-Initiated Catholic (meaning already received Baptism/First Reconciliation/First Eucharist/& Confirmation)
 - -Active and Living Faith (seeks to live a faithful Catholic life, fully committed to the mission of the Church and participates in Mass on regular basis)
 - -Willing and able to give time/commitment to walk with Candidate through the Confirmation process (see also specific responsibilities below)
 - -Someone Other Than Parent (canon 874.5)

- -As the two sacraments are connected, a Baptismal Sponsor (Godparent) is the preferred Sponsor for Confirmation when possible.
- -Over the age of 18 and possess the spiritual maturity to act as a good role model to their candidate by challenging them to live more fully the message of the gospel

Specific Responsibilities of Sponsors: During the program, Sponsors need to be available to work with their Confirmation **Candidate** on the following:

- Attend Sponsor workshop with Candidate on Sunday, November 15th.
- Attend Confirmation Rehearsal on Monday just prior to Confirmation from 6:30-9:00PM (date to be determined).
- Arrive with candidate on Confirmation Day at least an hour prior to mass.
- Confirmation Date and time to be determined (sometime in late April or May)
- Research together the lives of the saints
- Help Candidate choose a Confirmation Name (name given at Baptism or other saint name)
- Share faith stories
- Discuss particular Scripture passages/topics
- Discuss/participate together in ministry/community service

(The sponsor responsibilities will be discussed further at the sponsor workshop on Nov 15. If you have any questions regarding Sponsor choice, feel free to contact Elaine for assistance.)

- **FAMILY COMMITMENT:** The families of potential candidates should also make a commitment to the preparation process by attending mass regularly and striving to live out the gospel message. This is a great opportunity for the family to strengthen and deepen their faith together.

A parent or guardian of the candidate must attend the first meeting and mass on Sunday, September 20th from 3:00-6pm

- **Flexibility:** It is understood that today's teens are very busy. In the event an important conflict exists with one of the required components there are make-up opportunities. See specifics on the Confirmation Schedule

ST. PIUS PARISH

Confirmation Registration Form

2009-2010

Candidate Contact Info	
Candidate's First Name	Last Name
Address	
City	Zip Code
Home Phone	Cell
Candidate's Email (please print clearly)	
Family Email (please print clearly)	

Education	
Child's Date of Birth	
Grade in School in September 2009	
Name of School	

Father	
First Name	Last Name
Complete address only if different from child's address.	
Address	
City	Zip Code
Home Phone	Work/Cell
Religion	Occupation

Sacraments	
Check sacraments received by the child.	
	Baptism
	First Communion
	First Reconciliation
	Confirmation

Mother	
First Name	Last Name
Complete address only if different from child's address.	
Address	
City	Zip Code
Home Phone	Work/Cell
Religion	Occupation

Where baptized?	
Church _____	
City/State _____	
Date (mo/yr) _____	

If not baptized at St. Pius, then a copy of the baptismal certificate is required to be attached to this form!

Years of religious education

Emergency Info	
Emergency Contact	
Phone Number	
Relationship	
Mother's Maiden Name	

Is the family registered with the Parish?	YES NO
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Instructions:
Fill out a separate form for each child.

Please completely fill out both sides of this form!

SPONSOR INFORMATION

PLEASE PRINT

Candidates Name _____

Sponsors full name _____

Address _____

Sponsor's Phone Numbers

Home _____

Cell _____

E-Mail _____

Sponsors must be at least 18 years of age, attend mass weekly and must have received the sacraments of Baptism, First Communion and Confirmation.

THE ARCHDIOCESE OF SAN FRANCISCO

PARENTAL PERMISSION FORM

This form is applicable to the 2009-10 Confirmation program at St. Pius including scheduled Sunday Meetings in Homer Crouse Hall, the Confirmation retreat on Sunday, January 10, 2010 from 9am-6pm at St. Patrick Seminary, small group meetings and service projects as arranged. All activities for Confirmation will be posted on the parish website at www.pius.org.

CHILD'S NAME: _____

PARISH: _____

ADDRESS (Street, City, Zip) _____

PHONE: (____) _____ EMAIL: _____

SCHOOL: _____ GRADE: _____

BIRTH DATE _____

PARENT/GUARDIAN'S NAME: _____

ADDRESS (Street, City, Zip) _____

HOME PHONE: (____) _____ WORK (____) _____

CELL (____) _____

PERSON (S) (OTHER THAN PARENT/GUARDIAN) TO NOTIFY IN CASE OF EMERGENCY:

NAME: _____ PHONE: (____) _____

I, the parent/guardian of the above-named child, hereby give my permission for his/her participation in the activity named above. I agree to direct my child to cooperate and conform to the directions and instructions of the parish, school, or Archdiocesan personnel responsible for the activity.

I agree, to the extent permitted by law, that in the event my child is injured as a result of his/her participation in the above-named activity, including but not limited to transportation to and from the activity, whether or not caused by the negligence (active or passive) of the parish/school or Archdiocesan youth activities program, or any of its agents or employees, recourse for the payment of any resulting hospital, medical, or related costs and expenses will first be had against any accident, hospital or medical insurance, or any available benefit plan of mine or of my spouse.

I am not aware of any medical condition of my child, which would render it inappropriate for him/her to participate in any such activity.

I hereby give permission to the physician selected by the youth activities supervisory personnel then present to render medical treatment deemed necessary and appropriate by the physician.

Further, I hereby waive any and all rights to, or compensation for, any photographs, videotapes, motion pictures, recordings, or any other record of this event or activity, which may be made by the Archbishop/Parish/School/Agency and affiliate organizations.

PARENT/GUARDIAN'S SIGNATURE: _____ DATE: _____

OTHER PARENT/GUARDIAN'S SIGNATURE: _____ DATE: _____

While being sensitive to single parent situations and possible embarrassment to the children, signature of both parents should be obtained when possible.

Both Sides of This Form Must Be Completed & Signed

THE ARCHDIOCESE OF SAN FRANCISCO

WAIVER AND RELEASE FORM RELATING TO MINORS

In consideration of the acceptance of my child's application for participation in the event described herein, I hereby grant permission for my child to participate in the event and, to the extent permitted by law, waive, release, and discharge any and all claims for damages for death, personal injury, loss, or property damage which I may have or which may hereafter accrue to me or my child, as a result of my child's participation in the event or activity described herein, including but not limited to transportation to and from the event or activity, whether or not caused by the negligence (active or passive) of the Archdiocese. This Waiver and Release is intended to release and discharge in advance the promoters, sponsors, officials, leaders and THE ROMAN CATHOLIC ARCHBISHOP OF SAN FRANCISCO, A CORPORATION SOLE, and St. Pius Parish and their officers, agents, and employees (The Archdiocese) from any and all liability, except for that attributable to willful misconduct, arising out of or connected in any way with my child's participation in

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- It is further understood and agreed that this Agreement, Waiver, and Release is to be binding on my heirs and assigns.
- Also, I hereby attest and verify that my child is physically fit and capable of participation in this event, and further, my child's physical condition for safe participation in this above-described event or activity has been verified by a licensed medical doctor during the last year, and that my child is under the age of 18.
- I agree to inform my child to abide by the rules established by the promoters, sponsors, officials, or leaders of the event or activity, and to obey the directions given by any of them.
- Further, I hereby waive any and all rights to, or compensation for, any photographs, videotapes, motion pictures, recordings, or any other record of this event or activity which may be made by the Archbishop/Parish/Agency and affiliate organizations.
- Further, I hereby attest that my child's participation in this event or these activities will be conducted on his/her own time and not on his/her employer's time, that this is for his/her own personal benefit, and any injury sustained will not be considered by myself or my heirs or assigns as a work-incurred injury.
- This Waiver and Release form is signed in order to participate in this event or activity for my child's own personal enjoyment and benefit, and is done so freely with full knowledge of the risks and dangers incident thereto.

(Signature of Father/Guardian) Date _____

(Signature of Mother/Guardian) Date _____

I have read and/or discussed with my parents this Waiver and Release form concerning participation in the event. I understand it and agree that the Waiver and Release shall apply to me also.

Date _____

(Print Student Participant's Name)

(Signature of Student Participant)
Both Sides of This Form Must Be Completed & Signed