



# ST. PETER CATHOLIC CHURCH

## CHILDREN'S SACRAMENTAL PREPARATION PROGRAM REGISTRATION

### 2 YEAR PROGRAM

	Parishioner Cost	Nonparishioner Cost
3 <sup>rd</sup> Grade (Year 2)	\$50	\$100

- Full Payment is due at time of registration and is **non refundable**.
- Please begin working on the Confirmation Sponsor Paperwork
- Letter of good standing from the Sponsor's Home parish
  - Copies of sponsor's Confirmation certificate and marriage certificate if married
- Every family is required to join Flocknote; communication will be done through email and text.

**Child's Name (First and Last)** \_\_\_\_\_

Nombre formal de niño/a (nombre y apellido)

**Grade** \_\_\_\_\_ **Age** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

Grado

Edad

Fecha de nacimiento

**Mother (Madre)** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **E-Mail** \_\_\_\_\_

**Father (Padre)** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **E-Mail** \_\_\_\_\_

**Address (Dirección)** \_\_\_\_\_

**City (Ciudad):** \_\_\_\_\_ **Zip: (el código postal)** \_\_\_\_\_

**Emergency contact name** \_\_\_\_\_

Contacto de emergencia

**Emergency Contact Phone:** \_\_\_\_\_ **Relationship to student** \_\_\_\_\_

Teléfono

Relación a estudiante

**Program Requirements**

I/We \_\_\_\_\_

(Print Name)

Understand and will abide by the requirements of the St. Peter’s Catholic Church Sacramental Preparation Program requirements which are:

1. At least one parent must attend the mandatory parent meeting before start of classes.
2. Parents & students must attend Mass every Sunday (or Saturday Evening) & on Holy Days of Obligation
3. Parents (one or another) must attend 1 class each month for the duration of the sacramental preparation program.
4. A copy of my child’s baptism certificate must be attached to the registration form.
5. Confirmation sponsor letter of good standing must be attached to the registration form (if enrolling child into 3<sup>rd</sup> grade).
6. Every family is required to join Flocknotes
7. Regular attendance is required. Over 3 absences may result in the student being removed from the sacramental preparation program.

**Parent’s/Guardian’s Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Firma de madre o padre

Fecha

**Release of Liability:**

I/We \_\_\_\_\_

(Print Name)

The undersigned to hereby release, forever discharge and agree to hold St. Peter Catholic Church harmless from and against any and all liability, claims, demands, lawsuits and expenses arising from personal injury, sickness, death, or property damage of any nature whatsoever which may be incurred or suffered by the undersigned and or the participant (if participant is under 18 or, 18 and older) while attending the above activity. Furthermore, the undersigned hereby assume all risk of personal injury, sickness, death, damage and expense arising from the undersigned’s or participant’s participation in all activities, including recreation and work activities involved in the above activity. The undersigned further hereby agree to indemnify and hold St. Peter Catholic Church and it’s respective members, director’s, employees and agents (collectively the ‘indemnities’) harmless from and against any and all claims, demands, actions, lawsuits, and liabilities including attorney’s fee and expenses sustained by the indemnities as the result of the negligent, willful or intentional acts of the undersigned and/or participant. Additionally, I/We do hereby consent to any medical care and the administrations of anesthesia determined by a physician to be necessary for the welfare of my child while said child in under the care of St. Peter Catholic Church and I/We am not reasonably available by telephone to give consent.

**Parent’s/Guardian’s Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Firma de madre o padre

Fecha

**Photo Release:**

I/We give permission for photos of my/our child to be used in church media (i.e. the bulletin, the website, etc.).

**Parent’s/Guardian’s Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Firma de madre o padre

Fecha

**Permission & Medical Release (Permiso y Autorización Médica)**

I agree on behalf of myself, my child(ren) named as minor participant herein, or our heirs, successors, and assigns, to hold harmless and defend St. Peter Catholic Parish, its officers, directors, employees and agents, and the Archdiocese of Denver, its employees and agents, chaperones, or representatives associated with the activities, from any claim arising from or in connection with my child participating in the activities, or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate St. Peter Catholic Parish, its officers, directors and agents, and the Archdiocese of Denver, its employees and agents and chaperones, or representative associated with the activities for reasonable attorney’s fees and expenses which they may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of St. Peter Catholic Parish or the Archdiocese of Denver.

**Parent’s/Guardian’s Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Firma de madre o padre

Fecha



# ST. PETER CATHOLIC CHURCH

## SACRAMENTAL PREPARATION PROGRAM REQUIREMENTS

### 3RD GRADE

The requirements of the St. Peter's Catholic Church Sacramental Preparation Program are the following:

1. At least one parent must attend the mandatory parent meeting before start of classes. The meeting is on **Sunday, September 16<sup>th</sup> at 10AM** in the Parish Hall.
2. Parents & students must attend Mass every Sunday (or Saturday evening) & on Holy Days of Obligation
3. One parent must attend a class each month for the duration of the sacramental preparation program. (8 classes in total)
4. Regular attendance is required. Over 3 absences may result in the student being removed from the sacramental preparation program.

**Classes are held at the School Building (Across the street from the Church) 9:45 AM – 11:15 AM**

Children's Class Calendar		Parent Class Calendar
<b>2018</b>	<b>2019</b>	<b>*class dates are not final*</b>
September	January	September
9	6	16 <sup>th</sup> or 30 <sup>th</sup>
16	13	October
23	20	14 <sup>th</sup> or 28 <sup>th</sup>
30	27	November
October	February	4 <sup>th</sup> or 18 <sup>th</sup>
7	3	December
14	10	2 <sup>nd</sup> or 16 <sup>th</sup>
21	17	January
28	24	13 <sup>th</sup> or 27 <sup>th</sup>
November	March	February
4	3	10 <sup>th</sup> or 24 <sup>th</sup>
11	10	March
18	17	10 <sup>th</sup> or 24 <sup>th</sup>
	24	April
December	April	April
2	7	7 <sup>th</sup> or 14 <sup>th</sup>
9	14	
16		





# ST. PETER CATHOLIC CHURCH

## Confirmation Sponsor Proof of Good Standing

Name of Confirmation Student: \_\_\_\_\_

Name of Prospective Sponsor: \_\_\_\_\_ Phone Number \_\_\_\_\_

**This form (other something equivalent) is required and must be completed in full in order for one to serve as a Confirmation Sponsor.**

### Prospective Sponsor, please answer the following questions:

- Are you a baptized Catholic who has received Confirmation and First Holy Communion?  Yes  No
- Are you at least 16 years old?  Yes  No
- Are you one of the parents of the person seeking Confirmation?  Yes  No
- Do you strive to live according to the Gospel and precepts of the Church, specifically:
  - Do you attend Mass on Sundays (or Saturday evenings) and holy days of obligation?  Yes  No
  - Do you go to Confession regularly (at least once per year)?  Yes  No
  - Do you receive Holy Communion regularly (at least once per year during the Easter season)?  Yes  No
  - If married, are you married in the Catholic Church?  Yes  No  Never married
  - If not married, are you living with a boyfriend or girlfriend?  Yes  No  Not applicable
  - Do you assist with the material needs of the Church?  Yes  No

\_\_\_\_\_  
Signature of Prospective Sponsor

\_\_\_\_\_  
Date

### Confirmation Sponsor Certificate of Good Standing

*Must be signed by Pastor (or his representative) of Sponsor's Parish of Record*

This certificate verifies that

**Name of Sponsor:** \_\_\_\_\_

is a fully initiated Catholic in good standing within the Church, an active member of my parish, and thus has my permission to serve as a Confirmation Sponsor.

**Signature / Title:** \_\_\_\_\_

**Parish Name:** \_\_\_\_\_

**Parish Address:** \_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_

**Affix Parish Seal**



# ST. PETER CATHOLIC CHURCH

## Carta de Vigencia para los Padrinos de Confirmación

Nombre del estudiante(s): \_\_\_\_\_

Nombre del Padrino/Madrina: \_\_\_\_\_ Telefono: \_\_\_\_\_

**Esta forma es necesaria y debe ser completada en su totalidad para poder servir como Padrino/Madrina de Confirmación**

### Posible Padrino/Madrina, por favor contestar estas preguntas:

- Ud ha sido Bautizado/a Católico y ha recibido Confirmación y Primera Comunión?  Si  No
- Tienes al menos 16 años?  Si  No
- Eres uno de los padres de la persona que van a bautizar o a confirmar?  Si  No
- Se esfuerza por vivir según el Evangelio y las enseñanzas de la Iglesia Católica:
  - Atiende a Misa los Domingos ( Sábados en la noche) y días de obligación?  Si  No
  - Va a la Confesión seguido? Al menos una vez al año?  Si  No
  - Si casado, está casado en la Iglesia Católica?  Si  No  Nunca casado
  - Si no esta casado, está viviendo con el novio o la novia?  Si  No  No es aplicable
  - Tú ayudar con las necesidades materiales de su parroquia?  Si  No

\_\_\_\_\_  
Firma del posible Padrino/Madrina

\_\_\_\_\_  
Fecha

### Certificado de Buena Conducta para los Padrinos

*Debe ser completado por el Pastor de la Parroquia de los Padrinos*

Este certificado verifica que

**Nombre del Padrino/Madrina:** \_\_\_\_\_

Es un buen Católico completamente iniciado en buena posición dentro de la Iglesia, Un miembro active de mi parroquia, y por lo tanto ese legible para server como padrino/madrina para la Confirmación.

**Firma del Pastor:** \_\_\_\_\_

**Nombre de la Parroquia:** \_\_\_\_\_

**Dirección de la Parroquia:** \_\_\_\_\_  
\_\_\_\_\_

**Fecha:** \_\_\_\_\_

**Sello de la Parroquia**