



ST. PETER CATHOLIC CHURCH

HOMESCHOOL

SACRAMENTAL PREPARATION PROGRAM REGISTRATION

FOR THOSE WHO ARE OUTSIDE THE RESTORED ORDER NORMS (GRADES 3 AND ABOVE)

PARENTS ATTEND CLASSES AND PREPARE THEIR CHILDREN AT HOME

Sacraments Needed	Cost
Confirmation Only (1 Year)	\$100
Confirmation and First Holy Communion (2 Years)	\$100/year

- Full payment must be made at time of registration so books can be ordered.
- A certified copy of my child's baptism certificate **must** be attached to registration form.
- Confirmation Only Enrollments must also include Confirmation Sponsor Paperwork:
 - letter of good standing from the Sponsor's home parish
 - Copies of 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

Sacraments needed: Confirmation First Holy Communion

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, Sunday September 16th at 10 AM in the Parish Hall
2. Parents & students must attend Mass every Sunday (or Saturday Evening) & on Holy Days of Obligation
3. Parents (one or another) must attend 2 classes 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 for Confirmation only).
6. Every family is required to join Flocknotes
7. Regular attendance is required. Over 3 absences may result in the family 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

HOMESCHOOL

SACRAMENTAL PREPARATION PROGRAM REQUIREMENTS

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

1. First Class will be September 23rd in the School.
2. Parents & students must attend Mass every Sunday (or Saturday evening) & on Holy Days of Obligation
3. One parent must attend the two classes each month for the duration of the sacramental preparation program. (16 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

Parent Class Calendar		Children's Class Calendar
2018	2019	
September	January	While parents are in classes learning about their Catholic Faith and the Sacraments, children will be offered classes which will introduce the concepts taught at home as well as activities relating to the lessons.
23	6	
30	13	
October	27	
7	February	
14	3	
28	10	
November	24	
4	March	
11	3	
18	10	
December	24	
2	April	
9	7	
16	14	



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