



ST. JOHN EUDES CATHOLIC CHURCH
CONFIRMATION PROGRAM for Minors 9th-12th Grade
Registration Form 2020-2021

I. CANDIDATE INFORMATION

Please circle one Year 1 or Year 2

Candidate Name: _____ Nickname: _____
First Middle Last
Birthdate: _____
 Male Female Student E-mail address: _____
School: _____ Grade: _____
Baptism Date: _____ Church: _____ City/State: _____
First Communion Date: _____ Church: _____ City/State: _____

II. PARENTS/GUARDIANS INFORMATION

Child live with Both Parents Mother Father Guardian (Specify): _____
Relationship: Father Stepfather Grandfather Name: _____
First Last
Cell Phone: _____ Catholic? Y N if not, Religion: _____
Relationship: Mother Stepmother Grandmother Name: _____
First Last
Cell Phone: _____ Catholic? Y N if not, Religion: _____
Marital Status: Civil Married Divorced Single Widower

III. CONTACT INFORMATION

Family Last Name: _____
Street Address: _____ Contact Phone Number: _____
City: _____ Zip Code: _____ Contact Email: _____

IV. EMERGENCY CONSENT

I authorize the following adults to pick up my child from class. In an emergency, if you are unable to reach me, I authorize my child to be released to their care

Name: _____ Phone: _____ Relationship to Child: _____

V. AUTHORIZATION AND CONSENT

MEDICAL TREATMENT (authorized with signature below)

As a parent or legal representative, I authorize and give my consent for my child to obtain all necessary medical and first aid treatment to preserve the life, limb, or welfare of the child in the event of a emergency.

Specify allergies, chronic illnesses, learning problems, or other problems that affect your child:

Medical Insurance: _____ Policy Holder: _____ Identification #: _____

IN CASE OF EMERGENCY (authorized with signature below)

I authorize and give my consent for my child to be retained in the parish and delivered only to parents or authorized adults on the registration form.

PRESS RELEASES (authorized with signature below)

I authorize and give my consent to St. John Eudes Parish to use photos/videos taken of my child during parish events in publications, videos and website.

Parent's Signature

Date

VI. PROGRAM FEES*

Registration Fees: **(Please pay now with the registration)**

One child: \$50.00

Two or more children: \$100.00

Additional Fees (per child): **(Future payment if pandemic conditions change)**

Confirmation Year 1 Retreat \$60.00

Confirmation Year 2 Retreat \$160.00

Are you registered in the parish? Yes No

If your answer is "Yes" write down the registration number envelope # _____

If your answer is "No" the additional fee per family is \$50.00

Additional fee applies if family has not been registered for 6 months minimum.

***Program fees including registration and retreat are non-refundable.**

Total _____

OFFICE USE ONLY

Date: _____ Amt. Paid: _____ Cash or Check #: _____ Receipt #: _____ Balance: _____

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Notes: _____

Youth Behavior Guidelines

The following behavior guidelines are to be observed at all times by participants. Participants who break any of these behavior guidelines may be sent home, requiring that a parent or guardian come to pick them up immediately.

THERE WILL BE RESPECT FOR ALL PROPERTY

Property of St. John Eudes Parish, School, and surrounding areas, and vehicles used for transportation shall not be damaged, taken, marked, or vandalized in any way. Personal property shall not be used without permission or damaged in any way.

THERE WILL BE CONCERN FOR SAFETY AND RESPECT FOR THE LAW

Participants are to cooperate with, and conform to, the directions and instructions of St. John Eudes Parish staff and volunteers, law enforcement, and the staff and officials of events, outing locations, bus companies, etc. There shall be no drugs, alcohol; or tobacco products in any participant's possession. There shall be no weapons or fire starters of any kind in any participant's possession. Physically, verbally, or emotionally abusive behavior towards others will not be tolerated. Foul language and dirty jokes are unacceptable. Fighting of any kind will not be tolerated.

THERE WILL BE RESPECT, COOPERATION, AND APPROPRIATE PARTICIPATION

Everyone will get the most out of the confirmation program if we all respect one another and participate fully, actively, consciously, and conscientiously. Unnecessary talking during times of prayer, sharing, and/or reflection is unacceptable. Electronic and communication devices are to be turned off and kept out of sight during the class or else they will be confiscated.

APPROPRIATE ATTIRE WILL BE WORN AT ALL TIMES

Attire or exposure that is deemed indecent or inappropriate by staff and/or volunteers will not be tolerated, including, but not limited to: exposed underwear (including bra straps), exposed cleavage, bare midriffs, strapless tops, short shorts/skirts/dresses (**shorts, skirts, and dresses must be at least mid-thigh length**).

Some possible responses to violations of these guidelines include: parent(s)/guardian(s) being required to make arrangements for a participant's transportation home early, the confiscation of items in a participant's possession, a meeting with the participant's parent(s)/guardian(s) being required before the participant's return to programming, the contacting of local law enforcement, etc. Serious or repetitive infractions may result in the suspension or expulsion of a participant from future programming.

I have read and understand these guidelines.

Candidate's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____

ARCHDIOCESE OF LOS ANGELES ADULT CONSENT AND RELEASE FORM

LOCATON: St. John Eudes Catholic Church

ACTIVITY: Youth Ministry/Confirmation Program

DATE AND PLACE: August 30 2020 - June 30 2021/ St. John Eudes Catholic Church Premises

LIABILITY RELEASE, INDEMNITY AND PROMISE NOT TO SUE:

I, the undersigned below, in consideration of my participation in the Activity described above and any related activities (the "Activity"), wherever the Activity may occur, acknowledge that I am aware that my participation in the Activity may result in bodily injuries and/or death. I have no known medical needs, allergies or dietary restrictions except as follows:

_____ I freely assume for myself and on behalf of my heirs, executors, administrators and next of kin, all risks incidental to such participation and hereby release, covenant not to sue, and forever discharge the Location, The Roman Catholic Archbishop of Los Angeles, a corporation sole, the Archdiocese of Los Angeles Education & Welfare Corporation and their employees, agents, volunteers and representatives ("Released Parties") of and from all liabilities, claims, actions, damages, costs and expenses of any nature arising out of, related to, or in any way connected with my participation in the Activity and/or any such related and associated activities, and further agree to defend, indemnify and hold each of the Released Parties harmless from and against any and all such liabilities, claims, actions, damages, costs and expenses including reasonable attorneys' and expert's fees and costs. I understand that this Release, Indemnity and Promise Not to Sue includes any claims based on the negligence, action or inaction of any of the Released Parties and covers bodily injury (including, without limitation, death), property damage, and loss by theft or otherwise suffered by me either before, during or after participation in the Activity. I declare that I am physically fit and physically and emotionally capable of taking part in the Activity and/or any such related and associated activities. I further authorize medical treatment for me, at my cost, if the need arises.

AUTHORIZATION AND RELEASE TO USE LIKENESS: I further grant the Released Parties the right to photograph and/or videotape me and further to display, use and/or otherwise exploit my name, face, likeness, voice, and appearance forever and throughout the world, in all media, whether now known or hereafter devised (including, without limitation, in online web casts, television, motion pictures, films, newspapers, and magazines) and in all forms including, without limitation, digitized images, whether for advertising, publicity, or promotional purposes, including, without limitation, publication of Activity results and standings, without compensation, reservation or limitation.

MISCELLANEOUS: This Release shall be governed by the laws of the State of California, and any legal action related to or arising out of the subject matter herein shall be commenced exclusively in the Superior Court in and for Los Angeles County, California. I certify I am eighteen (18) years of age or older. If any provision of this Release shall be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Release and shall not affect the validity and enforceability of any remaining provisions.

I HAVE READ, UNDERSTOOD AND ACCEPT THE CONDITIONS OF THIS (i) LIABILITY RELEASE, INDEMNITY, AND PROMISE NOT TO SUE, AND (ii) AUTHORIZATION AND RELEASE TO USE LIKENESS.

Child's Name: _____

Parent's Name: _____

Parent's Signature: _____

Date: _____

**Empowering God's Children and Young People©
Safety Program
"Parent's Permission Slip"**



TO: Parents/Guardians
FROM: St. John Eudes Parish – Children and Youth Ministries - Religious Education Program
SUBJECT: VIRTUS® Empowering God's Children and Young People Safety Program
DATE: 2020– 2021 Cycle

The Los Angeles Archdiocese Office of Safeguard the Children has developed a new K-12 “Empowering God’s Children and Young People”© Safety Program for schools and Religious Education Programs. This new program is designed to help children and young people to know that they have the power to protect themselves from harmful or threatening situations and to always aim to keep themselves safe and healthy. This program is 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 this program is to empower children and youth with the knowledge and understanding needed to keep themselves safe.

This year we will present the Empowering God’s Children Safety Program to our students in a class lesson during the month of **January**. The topic for this year’s lesson is **Year 1: Safe and Unsafe Touching Rules**. Each lesson will include: Introductory Video “Empowering God’s Children,” “Hands-on” classroom activities, Technology Component, Take Home activity to help parents/guardians review the lesson with their child, and a “Catechetical Connection” to the Catechism of the Catholic Church to magnify God’s desire for their happiness, health and safety. Parents/guardians seeking additional information regarding this program or who would like to review the materials/ videos, please feel free to contact **Marta Garcia at (818) 341–3680 ext. 110**.

For more information on the Empowering God’s Children Safety Program, please visit <https://lacatholics.org/empowering-gods-children/>



**St. John Eudes Parish Religious Education Program
Parent Permission Slip for the VIRTUS® Empowering God's Children Program**

I understand that for my child to participate in the VIRTUS® *Empowering God's Children Program* I need to fill out and return this Parent Permission Form with the Religious Education registration form. My signature below is my specific request for my child’s participation in the Empowering God’s Children Safety Program.

Minor’s Name (printed): _____

Parent’s Name (printed): _____

Parent’s Signature: _____

Date: _____

2020—2021 CONFIRMATION REGISTRATION REQUIREMENTS

- This Registration Form, completely filled out
- Copy of Certificate of Baptism
- Copy of Certificate of First Communion
- Virtus – Permission Slip
- Youth Behavior Guidelines
- Archdiocese of Los Angeles Adult Consent and Release Form
- Program Fees—Check/Cash payable to **St. John Eudes Parish** with **Confirmation 2020-21** on the memo line.