



ST. CLARE OF ASSISI CATHOLIC CHURCH RITE OF CONFIRMATION PREP SCHEDULE

REQUIRED SESSIONS:

2018

SEPT. 16TH | ORIENTATION & SESSION 1 | 5:30PM-8PM | BEGINS W/ MASS

OCTOBER 14TH | SESSION 2 | 5:30PM-8PM | BEGINS WITH MASS

2019

JANUARY 27TH | SESSION 3 | 5:30PM-8PM | BEGINS WITH MASS

FEBRUARY 24TH | SESSION 4 | 5:30PM-8PM | BEGINS WITH MASS

MARCH 24TH | SESSION 5 | 5:30PM-8PM | BEGINS WITH MASS

MAY 19TH | GRAD DINNER | 6PM-9PM | ST. CLARE GYM

REQUIRED SUMMER CONFIRMATION RETREATS:

COLOSSIANS 3:17 SERVICE MISSION | JUNE 19TH-23RD | HOUSTON

ARCHDIOCESE YOUTH CONFERENCE | JULY 26TH – 28TH | HOUSTON

RITE OF CONFIRMATION MASS T.B.A. (SEPT.-OCT. 2019)

DUE BY SEPTEMBER 16TH:

- BAPTISMAL CERTIFICATE (COPY)
 - PARENT AGREEMENT & MENTOR FORM
 - RITE OF CONFIRMATION INFORMATION FORM
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CONFIRMATION PARENT AGREEMENT

As a Parent, I will commit to:

- **Encourage my son/daughter to regular attendance and full participation in the Mass**
- **Support the Thrive Program & Confirmation Prep Program by sharing my time and talent to the best of my ability when requested.**
- **Teen must have 75% participation in THRIVE / Must make 15 of 19 Thrive Nights August-May.**
- **Will attend Colossians 3:17 Service Mission Retreat either after Year 1 or Year 2**
- **Teen will meet once-a-month with Mentor/Sponsor**
- **If Year 2, teen will attend the AYC Confirmation Retreat, July 26th-27th**
- **If teen is unable to attend the Confirmation Retreat with St. Clare's, I understand it's my responsibility as a Parent to find an alternate Confirmation Retreat with another Catholic Parish in the Archdiocese and correspond with Chris Stevenson about this arrangement.**
- **If Year 2, teen will attend ALL Confirmation Sessions**
- **Allow time to discuss with my son/daughter all that he or she has learned from the Sunday Session and to help with any take-home materials.**
- **Pray for and with my son/daughter each week.**



CONFIRMATION PARENT/TEEN AGREEMENT & MENTOR CONSENT/LIABILITY FORM

As a Parent, I will commit to:

- Encourage my son/daughter to regular attendance and full participation in the Mass
- Support the Thrive Program & Confirmation Prep Program by sharing my time and talent to the best of my ability when requested.
- Teen must have 75% participation in THRIVE / Must make 15 of 19 Thrive Nights August-May.
- Will attend Colossians 3:17 Service Mission Retreat either after Year 1 or Year 2
- Teen will meet once-a-month with Mentor/Sponsor
- If Year 2, teen will attend the Confirmation Retreat, July 26th-27th
- If teen is unable to attend the Confirmation Retreat with St. Clare's, I understand it's my responsibility as a Parent to find an alternate Confirmation Retreat with another Catholic Parish in the Archdiocese and correspond with Chris Stevenson about this arrangement.
- If Year 2, teen will attend ALL Confirmation Sessions
- Allow time to discuss with my son/daughter all that he or she has learned from the Sunday Session and to help with any take-home materials.
- Pray for and with my son/daughter each week.

Parent Name (Print)

Parent Signature

Teen Name (Print)

Teen Signature

DATE



MENTOR CONSENT & LIABILITY FORM

**Important! To be filled out by the Parent/Guardian for youth under 18 years of age.
(If participant is 18 years of age or older, consent must be signed by the individual)**

I (name of parent/guardian) _____, grant permission for my child, (participant's name), _____ to participate in meeting with _____ (sponsor/mentor's name) to be held when I, as their parent, arrange each monthly meeting with the individual (sponsor/mentor) I have chosen for my child.

In consideration of my child's participation in this event, I agree on behalf of myself, my child named herein, and our heirs, successors, and assigns to indemnify, hold harmless and defend the Archdiocese of Galveston-Houston, the sponsoring parish, its pastor, youth ministry leader, principal, other agents, employees or other representatives associated with the event from any and all injuries, losses or claims arising out of my child's participation in the event.

In signing this form I certify that all information contained herein is true and accurate to the best of my knowledge.

Signature (Parent/Guardian)

Date

Sponsor/Mentor Email:

****Please turn this copy in by our Confirmation Orientation. September 16th 7pm-8pm***

You can also drop it off to the Parish Office during the week.



**ST. CLARE OF ASSISI CATHOLIC CHURCH
RITE OF CONFIRMATION INFORMATION FORM
YEAR 2**

**PLEASE PRINT LEGIBLY*

CANDIDATE'S FULL BAPTISMAL NAME:

FIRST NAME

MIDDLE NAME

LAST NAME

AGE

DATE OF BIRTH

CHURCH OF BAPTISM:

NAME OF CHURCH

DENOMINATION OF CHURCH

DATE OF BAPTISM

STREET

CITY

STATE

ZIP

PHONE

PARENTS FULL NAMES

FATHER:

FIRST NAME

MIDDLE NAME

LAST NAME

MOTHER:

FIRST NAME

MIDDLE NAME

MAIDEN NAME

HOME ADDRESS:

STREET

CITY

STATE

ZIP

PHONE

*Please return completed form to the Parish Office

This information is recorded in our Parish Register. Please make sure all information is accurate and spelling is correct.