

St. Jane de Chantal Catholic Church

2021 Confirmation Prep Calendar

Aug	15	7:00-8:00 pm	Class & brief parent meeting in St. Jane Hall
	22	7:00-8:00 pm	Class
	29	7:00-8:00 pm	Class
Sept	5	no class	Labor Day Holiday
	12	7:00-8:00 pm	Class
	19	7:00-8:00 pm	Class--all Confirmation forms due
	26	7:00-8:00 pm	Class
Oct	2	9:00 am-5:00 pm	Confirmation Retreat at St. Michael Mission, Bush
	3	7:00-8:00 pm	Class
	10	7:00-8:00 pm	Class
	17	7:00-8:00 pm	Class
	24	7:00-8:00 pm	Class
	27	6:30 pm	Rehearsal in Church (students and sponsors)
	28	7:00 pm	Confirmation (arrive at 6:30 pm)

*Classes meet in Barre Center Library unless otherwise noted

*Service activity date TBD

ST. JANE DE CHANTAL CATHOLIC CHURCH & ST. MICHAEL MISSION
PARISH SCHOOL OF RELIGION

Gown Measurements and Card Information

Name: _____

Address: _____

City: _____

Parent's Name: _____

Confirmation Name: _____

Sponsor's Name: _____

Height: _____
(From top of head to floor with no shoes)

Weight: _____

Chest/Bust Measurement: _____

Return on or before September 19, 2021.

Please attach a copy of the candidate's baptismal certificate.

Godparent/Sponsor Testimonial for Baptism/Confirmation

Date: _____

Name of Person to be Baptized/Confirmed: _____

Proposed Date of Baptism/Confirmation: _____

Criteria to Serve as Godparent/Sponsor for Baptism/Confirmation

1. The Godparent/Sponsor must be a Catholic in good standing with the Church who has been Confirmed and regularly practices his/her Catholic faith;
2. The Godparent/Sponsor must be at least sixteen years of age;
3. If married, the Godparent/Sponsor must be in a marriage recognized as valid by the Catholic Church. Person may not be cohabiting (living together without marriage);
4. If not previously attended, the Godparent/Sponsor will attend appropriate preparation for fulfilling this role (Baptismal or Confirmation seminar, RCIA session, etc.)

Statement of Godparent/Sponsor

"I meet the above-stated criteria to serve as a Godparent/Sponsor, and I will do all in my power to assist the parents of this child to raise their child in the Catholic faith, or - if an adult - to assist him/her in living faithfully as a Catholic Christian."

By signing below, the proposed Godparent/Sponsor solemnly swears that he or she has read the above criteria, and that the statement above is a true and correct indication of his/her intentions.

Godparent/Sponsor's Signature: _____

Godparent/Sponsor's Name Printed: _____

Signature of Pastor or Delegate (In Parish where the sacrament is to be celebrated)

ARCHDIOCESE OF NEW ORLEANS
PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER

Participant's name: _____

Birth date: _____ Sex: _____

Parent/Guardian's name: _____

Home address: _____

Home phone : _____ Business phone: _____

I, _____, grant permission for my child, _____, to participate in this parish activity that may require transportation to a location away from the parish site. This activity will take place under the guidance and direction of employees and/or volunteers from St. Jane de Chantal Parish. A brief description of the activity follows:

Type of event: Confirmation Retreat

Location(s): St. Michael Mission, Bush, LA

Individual in charge: Christina Uhlich

Duration of activity: 9:00 am-5:00 pm

Mode of transportation to and from event: none provided

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant").

I confirm that there are no necessary changes to the Medical Information Consent form for my child that I previously submitted. If there are any necessary changes, I will complete another Medical Information Consent form.

I agree on behalf of myself, my child named herein, and my spouse, our heirs, successors, and assigns, to indemnify, hold harmless, and defend St. Jane de Chantal Parish and The Roman Catholic Church of the Archdiocese of New Orleans, their members, directors, officers, employees, agents and representatives associated with the event arising from or in connection with the negligence and/or intentional acts of my child.

Signature: _____ Date: _____