

St. John the Baptist Catholic Church

CONFIRMATION

Confirmation Prep is open to baptized, practicing Catholic students going into the 9th-12th grade. Registration is open July 1st-September 1st, 2019, and every student and his/her parent must attend an intake interview during that time. Call or email Tim to schedule your interview. The fee for classes must be paid by October 1st, 2019. Make checks payable to St. John the Baptist. One student: \$150 | Each additional sibling: \$75

Student info	Full Name	_____	Date of Birth	_____	
	Address	_____	Have you been Baptized: <input type="checkbox"/> Y <input type="checkbox"/> N When? _____ Where? _____		
	Student's Cell phone	_____			
	Email	_____	Rec'd 1 st Communion? <input type="checkbox"/> Y <input type="checkbox"/> N When? _____ Where? _____		
	School	_____ Grade _____			
	Parish	_____			
	Insurance Carrier	_____	Group or ID #	_____	
	Allergies/Accommodations/Medical Concerns: _____				

Mother Info	Full Name	_____	Are you Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No Would you like to volunteer to help with Confirmation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Address	_____		
	Home Phone	_____		
	Cell phone	_____		
	Email	_____		

Father Info	Full Name	_____	Are you Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No Would you like to volunteer to help with Confirmation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Address	_____		
	Home Phone	_____		
	Cell phone	_____		
	Email	_____		

CONFIRMATION REGISTRATION 2019-2020
 Coordinator: Tim Kluge • (503) 659-2760 • tkluge@sjbcatholicchurch.org

Office use only: BC: _____
 P: _____

Youth conduct, communication, & medical consent release statements

I, the undersigned hereby grant permission for my child to attend and participate in **St. John the Baptist Parish Confirmation classes and Youth Ministry events for the 2019-2020 program year**, and this registration form and the following agreements suffice for all Youth Ministry events that occur on campus at St. John the Baptist Church and School. (Additional registration and consent forms will be required for off-campus events.)

The youth participant agrees to abide by all rules and regulations governing these events and understands that fighting, obscene language, and the use and/or possession of tobacco, alcohol, illegal drugs, weapons, or contraband of any kind is not acceptable behavior. I understand that if the participant violates any of these expectations or any laws or rules governing personal and private property, that the participant’s parents will be notified and the participant may be required to leave the activity at his/her own expense. I also understand that the interpretation of these violations is at the discretion of St. John the Baptist parish staff and that the parish will not be held liable if my child fails to cooperate with these regulations.

I understand that various means of communication will be used throughout the year to contact participants in Youth Ministry and their parents for various reasons, including reminders, special announcements, schedule changes, etc. I give my permission for St. John the Baptist employees and volunteers to contact me and my child via email, phone call, or text message.

In case of medical emergency, I understand that every effort will be made to contact the parents or guardian of the participants. If necessary, and in the event I cannot be contacted or respond, I hereby grant permission for my son/daughter to be evaluated, diagnosed, and/or medicated in accordance with standard medical practice by licensed medical personnel. I relieve St. John the Baptist Church and the Archdiocese of Portland of all consequences that may arise as a result of treatment. I understand that such an undertaking involves an element of risk. I assume all risks and hazards incidental to such participation and do hereby release, absolve, indemnify, and agree to hold harmless St. John the Baptist Church and Archdiocese of Portland, staff, volunteers, and drivers from any and all liability that may arise out of participation in these activities. Furthermore, I agree to accept any and all financial responsibility as a result of treatment for injuries.

Parent Signature _____ *Date* _____

Participant Signature _____ *Date* _____

Media Release of Minors (optional):

I hereby grant St John the Baptist Church and the Archdiocese of Portland permission to publish still pictures, motion pictures, and audio or video recording of my minor child in its printed advertisements, website, social media, etc., in order to promote future events and to advance the mission of the Catholic Church. St. John the Baptist Church and the Archdiocese of Portland agree to remove any identifying information (name, age, etc.) about the minor whose image is used for this purpose. This permission will remain in effect annually from Sept 1, 2019 until Sept 1, 2020 unless revoked by written notice to St. John the Baptist.

Name of Minor _____

Parent Signature _____ *Date* _____