

# Corpus Christi Parish Community

## REGISTRATION FOR CONFIRMATION PREPARATION 2016-2017

Name of Candidate				
Last	First	Middle	Nickname	
Gender	Grade in Sep '16	Date of Birth (mm-dd-yyyy)	High School Attending in 2016	Year in Confirmation
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> 9th <input type="checkbox"/> 10th <input type="checkbox"/> 11th <input type="checkbox"/> 12th			____ Year I   ____ Year II
Family Information				
Street Address		City	State	ZIP Code
Home Telephone		Email Address (Primary Contact for Confirmation Updates)		
Mother				
First Name		Maiden Name	*Virtus trained?(yes or no) If no, are you interested in completing training? Y/N	
Cell Phone		Religion	Email Address	
Father				
First Name		Last Name	*Virtus trained?(yes or no) If no, are you interested in completing training? Y/N	
Cell Phone		Religion	Email Address	
Medical Information				
Emergency Contact		Relationship	Telephone No.	Cell Phone
Condition (chronic conditions or illnesses e.g. epilepsy, diabetes, food allergies)				
Regular Medication/Special Instructions				
Sacrament/Religious Education Information				
Date of Baptism		Church of Baptism	City/ State	Roman Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of 1st Communion		Church of 1st Communion	City/State	
Last Grade of Religious Education		Home Parish		
Other				
I, as a parent, will volunteer to: <input type="checkbox"/> Be a small group facilitator <input type="checkbox"/> Assist at a retreat <input type="checkbox"/> Chaperone a large group gathering <input type="checkbox"/> Sponsor a Speaker <input type="checkbox"/> Provide large group hospitality <input type="checkbox"/> Assist at the Confirmation Rite Mass			I grant Corpus Christi the right to photograph my dependent and use the photo for Corpus Christi publication purposes only. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Fees				
<input type="checkbox"/> Year I \$130 <input type="checkbox"/> Year II \$160		<input type="checkbox"/> Two Children \$230 *Year II extra fee includes retreat, Rite gowns, individual and group photos.		
Parent/Guardian Signature				
Signature			Date	
<b><u>Return Registration Form, Check &amp; Copy of Baptismal Certificate to:</u> Elsy Daou</b> <b>Youth Minister/Confirmation Coordinator</b> <b>(310)454-1328 ext. 238</b> <b>elsy@corpuschristichurch.com</b>		*VIRTUS® Protecting God's Children <b>Adult Awareness Session</b> is a three-hour training that helps clergy, staff, volunteers and parents to understand the facts and myths about child sexual abuse and how caring adults can take five important steps to keep children safe. The parent session also stresses monitoring of computers, cell phones and other technology that perpetrators use to gain access to children and young people. The Archdiocese of Los Angeles mandates this training for all adults working with children.		

**\*Sign VIRTUS Safeguard the Children permission slip on the back side of this form\***

**VIRTUS “Teaching Touching Safety” Children’s Program**  
**Archdiocese of Los Angeles**  
**“2016–2017 Permission Slip”**

**TO:** Parents of Confirmation Students

**FROM:** Corpus Christi Parish

**SUBJECT:** VIRTUS® *Touching Safety* Program for Children and Young People

We are committed to your child’s safety and well-being. Learning how to prevent abuse is important, not only for adults to keep children and young people safe, but also to teach our youth to protect themselves.

As part of the Archdiocese’s efforts to protect all children, we provide a VIRTUS® *Touching Safety* to our students. The Corpus Christi Confirmation Program will present this topic to teach our teens about safety and awareness in situations that arise in teen and young adult years. **We will present this year’s topic on** to our Confirmation students.

This program is provided by the Archdiocese of Los Angeles, and is part of our ongoing effort to help create and maintain a safe environment for children and youth to protect all children from sexual abuse. For more information on the *Touching Safety* program, you may visit the VIRTUS *Online*™ website at [www.virtus.org](http://www.virtus.org).

**If you have questions about the program, or would like additional information, please feel free to contact Jane Young, Director of Religious Education at (310) 454-1328 extension 226.**

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**Corpus Christi Parish Religious Education Program**  
**Parent Permission Slip for the VIRTUS® *Touching Safety* Program**  
**2016-2017**

I understand that for my child to participate in the VIRTUS® “Touching Safety Program” I need to fill out and return this Parent Permission Form. I am allowing my child to participate in the Protecting God’s Children Teaching Touching Safety Program for the Confirmation teens on December 11, 2016:

Child’s Name: \_\_\_\_\_.

Parent’s Name (printed): \_\_\_\_\_

Parent’s Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***(Failure to return the signed permission slip implies consent for child to attend program)***