

*Corpus Christi Parish*  
**Confirmation Registration Checklist**  
2024-25

- Completed Registration Form**
- Copy of Baptismal Certificate**  
(If not baptized at Corpus Christi Church or already submitted last year.)
- Copy of First Communion Certificate**  
(If not received at Corpus Christi Church or already submitted last year.)
- Annual Registration Fee** (Check only – payable to Corpus Christi Parish)
- Signed VIRTUS® “Empowering God’s Children”  
Permission Slip**
- Parent Permission Slip for Confirmation Dismissal**
- Sponsor Form – DUE BEFORE:**

November 1, 2024 – Year II candidates  
(If not already submitted last year)

January 31, 2025 – Year I candidates

**RETURN COMPLETED REGISTRATION PACKET TO:**

Confirmation Coordinator  
Corpus Christi Parish  
880 Toyopa Drive  
Pacific Palisades, CA 90272

**Thank you!**

# Corpus Christi Parish

## REGISTRATION FOR CONFIRMATION FORMATION 2024-25

*For Office Use Only*  
 VIRTUS \_\_\_\_\_ Baptism \_\_\_\_\_  
 1st Communion \_\_\_\_\_ Sponsor \_\_\_\_\_  
 Check Amount \$ \_\_\_\_\_

Name of Candidate				
Last	First	Middle	Height (for Confirmation Gown) ft.      in.	
Gender	Grade in 2024-25	High School Attending 2024-25	Date of Birth (mm-dd-yyyy)	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

Sacrament/Religious Education Information			
Date of Baptism	Church of Baptism (attach copy of certificate)	City/ State	Roman Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of 1st Communion	Church of 1st Communion (attach copy of certificate)	City/State	
Last Grade of Religious Education	Home Parish	Teen's 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 - Please attach detailed note.			

Mother			
First Name	Maiden Name	Registered at Corpus Christi Parish? <input type="checkbox"/> Yes <input type="checkbox"/> No	If other parish, name of home parish:
Cell Phone	Religion	Email Address (Primary Contact for Confirmation Updates? Yes/No)	

Father			
First Name	Last Name	Registered at Corpus Christi Parish? <input type="checkbox"/> Yes <input type="checkbox"/> No	If other parish, name of home parish:
Cell Phone	Religion	Email Address (Primary Contact for Confirmation Updates? Yes/No)	

Family Information			
Street Address	City	State	ZIP Code
Home Telephone	Mother VIRTUS* trained? <input type="checkbox"/> Yes <input type="checkbox"/> No	Father VIRTUS* trained? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Other	
I, as a parent, will volunteer to (check all that apply): <input type="checkbox"/> Be a small group leader <input type="checkbox"/> Assist at a retreat <input type="checkbox"/> Sponsor a Speaker <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 (Make checks payable to: Corpus Christi Parish)	
<input type="checkbox"/> Year I Youth Registration Fee \$170 <input type="checkbox"/> Year II Youth Registration Fee* - \$230 each	<input type="checkbox"/> Two Children Registration Fee - \$295 plus \$60* per Year II child. *Year II Confirmation Fee includes Rite Mass gown, professional photo, etc.

Parent/Guardian Signature	
Signature	Date

<p style="color: red; font-weight: bold;">Return Registration Packet, Check, &amp; Copy of Baptismal &amp; 1st Communion Certificates to:</p> <p style="text-align: center;"><b>Confirmation Coordinator</b>  <b>Corpus Christi Parish, 880 Toyopa Drive,</b>  <b>Pacific Palisades, CA 90272</b>  <b>310-454-1328</b></p>	<p>*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 stresses monitoring of computers, cell phones and other technology that perpetrators use to gain access to young people. The Archdiocese of Los Angeles mandates this training for all adults working with minors.</p>
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\*Sign VIRTUS Safeguard the Children permission slip on the back side of this form\*

**VIRTUS “Empowering God’s Children”® Program**  
**2024-2025 Permission Slip**

**TO:** Parents/Guardians of Confirmation Students

**FROM:** Corpus Christi Confirmation Program

**SUBJECT:** VIRTUS® Safety Program: “Empowering God’s Children”

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® *Empowering God’s Children* program to our students. The Corpus Christi Confirmation Program will present this program to teach our teens about safety and awareness in situations that arise in teen and young adult years.

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 our students and to protect all our students from any type of abuse. For more information, 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 Confirmation Program**  
**Parent Permission Slip for the VIRTUS® “Empowering God’s Children” Safety Program**  
**2024-2025**

I understand that for my student to participate in the VIRTUS® “Empowering God’s Children” sessions I need to fill out and return this Parent Permission Form. I am allowing my student to participate in the Protecting God’s Children Youth Program:

Student’s Name: \_\_\_\_\_

Parent’s Name (printed): \_\_\_\_\_

Parent’s Signature: \_\_\_\_\_

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

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



Corpus Christi Parish - Confirmation Program

880 Toyopa Drive, Pacific Palisades, CA 90272 Office (310) 454-1328

PARENT PERMISSION FOR CONFIRMATION DISMISSAL
2024-25

I am the parent of \_\_\_\_\_
(Print your child's first/last name.)

and give my permission for my child(ren) to be dismissed from his/her Confirmation Program
as follows - (check all that apply):

\_\_\_\_\_ I will pick up my child(ren) after Confirmation sessions.

\_\_\_\_\_ My child(ren) may walk home alone unaccompanied by an adult.

\_\_\_\_\_ My child(ren) has/have a valid driver's license and may drive himself/herself.

\_\_\_\_\_ My child(ren) has/have my permission to be picked up by the following adults
(no minors allowed to pick up youth):

\_\_\_\_\_ (Adult's Name - print) (phone)

\_\_\_\_\_ (Adult's Name - print) (phone)

As a condition of the Confirmation Program allowing my child(ren) to be released as stated
above, I hereby release and discharge The Roman Catholic Archbishop of Los Angeles, a
corporation sole, Archdiocese of Los Angeles Education & Welfare Corporation and the parish
and school, their respective employees and volunteers from any and all claims for personal
injuries, wrongful death or property damage that my son/daughter may suffer as a result of
participation in the activity described above, whether or not such injuries or damage are
caused by the negligence (active or passive) of the Archdiocese, the parish, the school, their
employees or volunteers.

Signature below signifies agreement and compliance: I give my permission for my child(ren)
named above to be released as I have indicated from their Confirmation Program sessions
located at Corpus Christi Parish at 880/890 Toyopa Drive, Pacific Palisades, CA 90272.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**CORPUS CHRISTI CATHOLIC CHURCH**  
**Sponsor Information**

Congratulations on being asked to be a Sponsor! By accepting this role, you are committing to play a significant role in this person's life. You will be asked to share your faith with this person and encourage them on his/her journey as a Catholic.

Please complete this form. **Once complete, return the form to the parents, or to the adult to be confirmed.**

Name of person to be Confirmed:

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First Name	Middle	Last Name
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Sponsor:

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First Name	Middle	Last Name
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Home Phone	Cell Phone	Email
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I am a member of Corpus Christi Parish:  Yes  No

Please complete the following if you are **not** a member of Corpus Christi Parish:

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Name of Catholic Parish you attend	City	State
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**Qualifications of a Confirmation Sponsor**

In accord with Canon Law 874 and 893, please provide the following information. If you have a question, please call the Confirmation Coordinator at 310-454-1328. **If you do not meet all of these requirements, please let the parents or the adult to be confirmed know immediately.**

1. A Sponsor must be fully initiated into the Catholic Church. Please indicate whether you have received the three Sacraments of Initiation: **Baptism:**  Yes  No **Confirmed in the Catholic Church:**  Yes  No **First Communion/Eucharist:**  Yes  No

2. A Sponsor must be at least 16 years old. Are you 16 or older?  Yes  No

3. A Sponsor cannot be the parent of the person to be confirmed. Are you the parent of this person?  Yes  No

4. A Sponsor must be in good standing with the Catholic Church.

- If married, he/she must be married in the Catholic Church and living in accord with Church teaching.
- If single, he/she must be living according to Church teaching.
- Catholics who were married by a Justice of the Peace, at another Christian church without special permission, and those cohabiting do not meet the requirements of this role.

Based on these guidelines, are you in good standing with the Church?  Yes  No

5. A Sponsor must be a practicing Catholic.

Do you attend Mass on Sundays and Holy Days of Obligation and regularly receive the sacraments of Holy Communion and Reconciliation?  Yes  No

**I have truthfully answered the above questions and declare that I fulfill the Catholic Church's requirements of a Confirmation Sponsor. I commit to the responsibility of acting as a Sponsor.**

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Sponsor Signature

Date