# Portsmouth Pastoral Area Confirmation Preparation Registration Form 2017 - 2018

*Our programme is open to young people who have already received the Sacraments of Baptism and Holy Communion, and who are in Year 8 or above at secondary school.*

**Deadline for applications: Friday 15th December 2017**

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| **Candidates Information** |
| **Parish we attend:** |  |
| **Candidates Full Name:** |  |
| **Date of Birth:** |  |
| **Home address****Including postcode:** |  |
| **Church and place of Baptism:**  |  |
| **Current School:** |  |
| **Year Group:** |  |
| **Does your child have any learning, behavioural, medical, physical or dietary needs we should be aware of :** |  |
| **Parents Information** |
| **Parents/Guardians Full Name:** |  |
| **Relationship to the candidate:** |  |
| **Home phone number:** |  |
| **Mobile phone number:** |  |
| **Email Address:** |  |
| **Emergency Contact Information** |
| **Contact’s Full Name:** |  |
| **Relationship to candidate:** |  |
| **Home phone number:** |  |
| **Mobile phone number:** |  |
| **Programme Details**The eight - week course will be run in three venues across the Pastoral Area. Each candidate needs to attend **one** course. Places will be allocated on a first come first served basis. Please indicate your preference (1st, 2nd, 3rd) by each course. You will be notified of which course your child has been allocated. In addition there will be a day for all candidates to come together and also a rehearsal session for the Confirmation itself. |
| **St. John’s Cathedral Hall, Portsmouth FRIDAYS 6.00 – 7.30pm**March 2nd , 9th, 16th, 23rd April 20th, 27th and May 11th and 18th  |  |

**Parents Agreement**

I agree to the information provided on the application form being retained by the Catholic diocese of Portsmouth on its electronic systems for the duration of the programme.

I accept my responsibility to work with the Pastoral Area Clergy and catechists in preparing my child for their Confirmation and that this will include the following:

* Encouraging my child to attend Sunday Mass regularly throughout the programme
* Ensuring my child attends each of the six preparations, the day for all candidates and the Confirmation rehearsal
* Paying the £15 contribution towards the cost of running the programme (this can be paid over a number of months)
* Ensuring my child follows the rules of behavior at each session

We, the parent/legal guardian do hereby give our permission for our child to attend Confirmation Preparation classes and to be treated for a medical emergency in our absence while participating in the program. The adult supervisor may act on our behalf in our absence. In case of accident, we do not hold the Diocese of Portsmouth, its staff, or the adult/teen catechists responsible for accident or injury.

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Relationship to candidate:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return the form to your parish office or email it to:** **chobbs@portsmouthdiocese.org.uk**