# **Portsmouth Pastoral Area Confirmation Preparation Registration Form 2024 - 2025**

*The programme is open to young people under the age of 18, who have usually received the Sacraments of Baptism and Holy Communion, and who are in Year 8 or above at secondary school.*

**Deadline for application: 24th November 2024.**

**PLEASE USE BLOCK CAPITALS TO COMPLETE THIS FORM.**

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| **CANDIDATE’S INFORMATION** |
| **Where is your usual place of worship?** |  |
| **Candidate’s Full Name:** |  |
| **Date of Birth: Sex:** |  |
| **Home address including postcode:** |  |
| **Church, date and place of Baptism and First Holy Communion:**  |  |
| **Current School:** |  |
| **Year Group:** |  |
| **Any learning, behavioural, medical, physical or dietary needs we should be aware of:** |  |
| **PARENT/GUARDIAN’S INFORMATION** |
| **Parent/Guardian’s 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:** |  |
| **We may provide snacks during sessions. Does your child have any allergies?****If yes, what do you suggest they receive?** |  |
| **PROGRAMME DETAILS**The course will run at St John’s Cathedral on specified **Fridays from 6pm to 8pm**. The timetable will be emailed to the parents and candidates after the closing date for applications (24th November 2024). Please include a fee of **£40** which will cover the cost of purchasing a copy of *YouCat*, photocopying, other didactic materials and a contribution towards utility costs and snacks. |

**PARENT’S 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 and for the administration of the Sacrament of Confirmation being included in the Registers of Confirmation and Baptism.

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

* Encouraging my child to attend Sunday Mass.
* Ensuring my child attends preparation classes, the day for retreat and the Confirmation rehearsal.
* Paying a **£40** contribution towards the cost of running the programme. Payment can be made by **cheque**, **cash** or by transfer to **CDP St John’s Cathedral 30-94-04 Account 0088 3884**, noting “**Confirmation**” and the **child’s name**.
* Ensuring my child follows the rules of behaviour at each session.
* Completing the obligatory photographic and video consents in line with safeguarding guidelines.

I, the parent/guardian do hereby give my permission for my child to attend Confirmation Preparation classes and to be treated for a medical emergency in my absence while participating in the programme. The adult supervisor may act on my behalf in my absence. In the event of an accident, I do not hold the Diocese of Portsmouth, the pastoral area, its staff, or the adult/teen catechists responsible for accident or injury.

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

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

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

***Please return the filled application form, along with a photocopy of the child’s Baptism and First Holy Communion certificates and the £40 contribution (if you have paid it directly to the cathedal bank account, please note this), to your parish office or email its email address.***