

**RITE OF CHRISTIAN INITIATION OF ADULTS FOR TEENS  
(RCIA)**

**WHO:** Any high school teen who is interested in being baptized, joining the Catholic Church, and/or interested in receiving First Communion (Eucharist).

**WHEN:** Sundays, September 24, 2017 – April 22, 2018, 9:15 a.m. – 11:30 a.m.

**WHERE:** St. Paul Youth Education Center (by the Community Center)

**CONTACT:** Michelle Weekley, Pastoral Associate in charge of Youth, 733-7152, ext 128

Baptism, First Communion (Eucharist) and Confirmation will be received at the Easter Vigil Mass on March 31st (but must still attend classes through April)

Fee: \$30 for per child  
\$100 max per family

Amount Paid:  
Cash \_\_\_\_\_  
Check \_\_\_\_\_

(Maximum fee of \$100 per family, preschool thru high school. The inability to pay the fee will not prevent any child from participating in our Program.)

- I would like to give an additional donation to assist another family in the religious education of their children. Amount donated: \_\_\_\_\_

**RCIA FOR TEENS**

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PARENT'S PHONE NO. \_\_\_\_\_ SCHOOL \_\_\_\_\_ GRADE \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_ PARENT'S EMAIL \_\_\_\_\_

Are you baptized in the Christian faith? \_\_\_\_\_ If yes, give name and address of church of baptism and **bring in copy of baptismal certificate.**

Are you already Catholic? \_\_\_\_\_ If yes, **bring in copy of baptismal certificate.**

Have you received First Communion (Eucharist)? \_\_\_\_\_

Have you celebrated the Sacrament of Reconciliation? \_\_\_\_\_ If yes, how long ago? \_\_\_\_\_

Have you chosen your Godparents or sponsors? \_\_\_\_\_ If yes, give their names

**For Office Use**

Recorded in Sacramental Registry  
 Baptismal Book  
 1<sup>st</sup> Communion Book  
 Confirmation Book  
 Church of Baptism Notified  
 Certificate(s) Prepared

**ST. PAUL RELIGIOUS EDUCATION  
MEDICAL CONSENT AND PERMISSION TO TREAT**

**SCHOOL YEAR 2017-2018**

My child is in the care of St. Paul's Religious Education Program for the purpose of this Religious Education activity.

I am giving medical permission and consent to treat.

To the best of my knowledge, my daughter/son, \_\_\_\_\_,  
is in good health, and I assume all responsibility for the health of my child.

In the event of an emergency, I give permission to transport my child to a hospital for emergency treatment. I wish to be advised prior to any further treatment by the hospital or doctor.

Parent/Guardian's Name \_\_\_\_\_

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**If you are unable to reach me, please contact:**

Name \_\_\_\_\_

Relationship to me or my child  
\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Please include a photocopy of your insurance card, front and back.**

Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

My child is taking the following medication(s):  
\_\_\_\_\_

I hereby grant permission for non-prescription medication (such as cough drops, cough syrup, Tylenol, etc.) to be given to my child if necessary.

I understand that aspirin will not be given to my child without my express permission. I grant such permission \_\_\_\_yes \_\_\_\_no.

My child is allergic to the following: \_\_\_\_\_.

My child's immunizations are current and up-to-date \_\_\_\_yes \_\_\_\_no.

My child has the following limitations: \_\_\_\_\_.

Please explain: \_\_\_\_\_

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

## CONFIRMATION FORM

IMPORTANT: You must turn in to the Religious Education Office a copy of your **BAPTISMAL CERTIFICATE** and this **FORM** before you receive the Sacrament of Confirmation. If you were baptized at St. Paul, we do not need a copy of the certificate. Just complete this form.

Please complete the following with information as shown on your Baptismal Certificate. Pay special attention to questions marked with an asterisk (\*).

\*CANDIDATE'S NAME: \_\_\_\_\_

CONFIRMATION NAME: \_\_\_\_\_

\*DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_

\*CITY OF BIRTH: \_\_\_\_\_ \*STATE: \_\_\_\_\_

\*DATE OF BAPTISM: \_\_\_\_\_

\*CHURCH OF BAPTISM: \_\_\_\_\_

\*STREET ADDRESS: \_\_\_\_\_

\*CITY: \_\_\_\_\_ \*STATE: \_\_\_\_\_ \*ZIP: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ PARENT'S WORK PHONE: \_\_\_\_\_

\*FATHER'S FULL NAME: \_\_\_\_\_

\*MOTHER'S FIRST AND **MAIDEN** NAME: \_\_\_\_\_

\*SPONSOR'S NAME \_\_\_\_\_

THIS FORM MUST BE FILLED OUT COMPLETELY.

For Office Use

\_\_\_\_ Certificate Prepared

\_\_\_\_ Recorded in Confirmation Book

\_\_\_\_ Church of Baptism Notified

**St. Paul Catholic Church  
Confirmation Sponsor Form  
2017/2018**

SPONSOR'S NAME \_\_\_\_\_  
FIRST MIDDLE LAST

NAME OF CONFIRMATION CANDIDATE \_\_\_\_\_  
FIRST LAST

SPONSOR'S ADDRESS \_\_\_\_\_  
CITY STATE ZIP CODE \_\_\_\_\_

SPONSOR'S PHONE # \_\_\_\_\_

I am a practicing Catholic in both word and deed : \_\_\_ Yes \_\_\_ No

I am a fully initiated Catholic (I have received the Sacraments of Baptism, Eucharist and Confirmation): \_\_\_ Yes \_\_\_ No

I am: \_\_\_ Single \_\_\_ Married \_\_\_ Divorced \_\_\_ Widowed

\*\*If married, were you married in the Catholic Church? \_\_\_ Yes \_\_\_ No

**\*\*If you answered "no" to any of the above statements, you are ineligible to be a sponsor at this time.**

**\*\*If you do not attend Mass on a regular basis (weekly), you are ineligible to be a sponsor at this time.**

Name of home parish: \_\_\_\_\_

Street address: \_\_\_\_\_ City/State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ (Arch) Diocese: \_\_\_\_\_

I am a registered parishioner: \_\_\_ Yes \_\_\_ No

**If you are NOT a registered Parishioner at St. Paul – please have your pastor complete the information below.**

"Pastors must ascertain the spiritual qualifications of sponsors. The sponsor for any candidate may be male or female and is to be sufficiently mature, a practicing Catholic, who has him/herself been confirmed and is has not been prohibited by law from exercising the roles of sponsor. One of the Baptismal Sponsors is not only allowed, but is in fact desired as the Confirmation sponsor, so as to emphasize the relationship between Baptism and Confirmation." (Canon 893). This person is an active witness of the Catholic faith in both word and deed, and is able to perform the duties of a Confirmation Sponsor.

Pastor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**DRESS CODE REQUIREMENTS  
ST PAUL PARISH MASSES AND EVENTS**

*All of the ceremonies and masses during the preparation for the reception of Sacraments require appropriate dress. These are sacred and special times for the candidates as well as for their families. The attention should be on the ceremonies and masses. Candidates' clothing should **not** call attention from the ceremonies and masses. With this objective in mind, the following dress code will be adhered to for **all** ceremonies and masses (to include the Rite of Welcome and the Rite of Election), this also includes the dress for the Sponsors. .*

**BOYS**

SUIT

SPORTS JACKET/DRESS SLACKS

CASUAL SLACKS/DRESS SHIRT

DRESS SHOES

**NO T-SHIRTS**

**NO JEANS**

**NO ATHLETIC SHOES OR FLIP FLOPS**

**GIRLS**

DRESS \*

SKIRT/BLOUSE \*

PANTSUIT

DRESS SHOES

**NO T-SHIRTS**

**NO JEANS**

**NO ATHLETIC SHOES OR FLIP FLOPS**

**\* PLEASE NOTE THE FOLLOWING:**

**A) SKIRTS ARE TO BE NO SHORTER THAN 2 INCHES ABOVE THE KNEE**

**B) NO LOW CUT OR STRAPLESS DRESSES OR BLOUSES (INCLUDING SPAGHETTIE STRAPS) – No cleavage should be visible and shoulders should not show!**

Thank you for your cooperation with this Dress Code. If you have any questions, please do not hesitate to call Michelle Weekley at 733-7152, ext. 128.

I have read and understand the above Dress Code Requirements and agree to abide by them for all classes, masses and events.

\_\_\_\_\_  
Candidate signature

\_\_\_\_\_  
Parent Signature

**2017-2018  
HIGH SCHOOL RCIA PROGRAM CALENDAR**

**September 10 – Parent Meeting**

September 24 – First Day of Class in session

*Period of Inquiry*

October 1 – No Class Due to Parish Festival

October 8 – Class in session

October 15 – Class in session

October 22 – Class in session

October 29 – Class in session

November 5 – Class in session

November 12 – Class in session

November 19 - Class in session

**November 26 – No Class – Thanksgiving Holiday**

December 3 – Class in session – **Rite of Acceptance and Welcome at the 10:30 am mass (mandatory)**

*Period of the Catechumenate*

December 10 – Class in session

December 17 – Class in session

**December 24 – No Class – Christmas Holiday**

**December 31 – No Class – New Year’s Holiday**

January 7 – Class in session

January 14 – Class in session

January 21 – Class in session

January 28 – Class in session

**February 4 – No Class – Confirmation/Spring Retreat** (may be changed)

February 11 - Class in session

**February 14 – Ash Wednesday**

*Period of Purification & Enlightenment*

February 18 – Class in session

February 25 – Class in session

**(Rite of Election TBD – more information to come)**

March 4 – Class in session - **1<sup>st</sup> Scrutiny (mandatory)**

March 11 – Class in session - **2<sup>nd</sup> Scrutiny (mandatory)**

March 18 – Class in session – **3<sup>rd</sup> Scrutiny (mandatory)**

March 25 – Class in session – Palm Sunday

**March 31<sup>st</sup> – Easter Vigil (more information to come)**

**April 1 – No Class – Easter Sunday**

April 8 – Class in session – **Fiesta of Mercy**

*Period of Mystagogia*

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Teen RCIA Calendar 2017-2018

April 15 – Class in session

April 22 – Last Class in session – **you will receive your certificates.**

Students can only miss 3 classes or they may not receive their sacraments and will have to attend classes the next year. **If you have to miss a class – contact Michelle Weekley at 733-7152, ext. 128 or email [mweekley@saintpaulsa.org](mailto:mweekley@saintpaulsa.org) .**