

Confirmation II Parent/Teen Agreement

TEEN COMMITMENT

I _____ agree to the following in order to participate in the **St. Michael**
Student's Name (Print) Confirmation Program:

Please initial each statement:

- ___ I will arrive on time and come with an open mind and heart. I will stay for the entire gathering.
- ___ I will be respectful of all staff, leaders, and my peers.
- ___ I will follow directions and willingly participate in discussions and activities.
- ___ I will not come to the gatherings under the influence of alcohol or drugs. Nor will I bring any drugs, illegal substances, contraband, weapons, cigarettes, or pornography to the gatherings.
- ___ I will not threaten anyone, act violently or inappropriately or use profane language.
- ___ I will place my cell phone in the receptacle provided by my leader during the duration of the gatherings.
- ___ Out of respect for others and myself, I will dress modestly.
- ___ I will attend Mass on the Second Sunday of each month – 11am Eng, or 12:30pm Sp.
- ___ I will complete all at home assignments per yearly calendar and turn them in on time.
- ___ I will complete 20 hours of community service per year.
- ___ I will attend the end-of-year assessment to discuss readiness to continue or receive the sacrament and know the **Nicene Creed** to pray it at the end of the assessment.
- ___ I understand what is expected of me in the Confirmation program.
- ___ I understand that if I miss more than **two** sessions it may delay my confirmation date so as to make sure that I am adequately prepared for the sacrament. **Note:** If you miss class due to illness or emergency, you may make up for the absence with an assignment. You **must** notify the Youth Minister/DRE to make arrangements to do so.
- ___ If I violate any condition of this agreement, I understand that my parents / guardians will be contacted and asked to pick me up immediately.
- ___ I will not be readmitted into future gatherings until my parents / guardians, youth ministry leader and I meet to discuss my future participation.

PARENT COMMITMENT

I, we _____, agree to the following conditions for our son/daughter:

Parent's Name (Print) _____ to participate in the **St. Michael**
Student's Name Confirmation Program

Please initial each statement:

- ___ I will discuss the above terms with my teen. I understand what is required of my teen.
- ___ I understand that I am the primary educator of my child and will do my best to support the spiritual well-being of my child.
- ___ I will attend Mass every Sunday and Holy Days of Obligation (per the Precepts of the Church) with my teen.
- ___ I will pray for my teens and the other teens in the Confirmation program.
- ___ I will get my teen to the gatherings on time and pick them up from the gatherings on time.
- ___ I will attend all parent/teen sessions and celebrations with my teen.
- ___ I will pick my child up if called to do so immediately and agree to meet with the Youth Minister.
- ___ I understand that if my teen misses more than **two** sessions, their confirmation may be delayed so as to make sure they are adequately prepared to receive the sacrament. **Note:** If your teen misses a class due to illness or emergency, he/she may make up for the absence with an assignment. You **must** notify the Youth Minister/DRE to make arrangements to do so.
- ___ I understand the requirements of the program and what is expected of my teen and I.

Student's Signature

Parent's Signature

Date Signed: