

Office of the Pastoral Associate
Dr. Joy Jones
Holy Trinity Parish
209 N. Hanford Ave.
San Pedro, CA 90732
310-548-6535 X317

Dear Teen RCIA / Sunday Confirmation year one parents,

You are welcome to sign your teen up for the first year of a two-year process for the completion of Catholic initiation sacraments through the Teen RCIA / Sunday Confirmation at Holy Trinity Parish. This is a very exciting year for teens. During the year, we will have a retreat, and a Rite at Mass and will learn a great deal about our Catholic Christian faith. This class design is for teens that need to complete any of their Initiation sacraments: Baptism, Eucharist, and /or Confirmation. This class is especially helpful for teens that have a limited amount of Religious Education.

Enclosed is a **registration form** for the 2023-2024 year. Please mail or drop off your form, at the Parish Center with payment as soon as possible. We need a separate form for each teen in your family. Please fill out both sides of the form. Please provide a copy of the teen's **Baptismal Certificate**, and submit it along with the registration form. If your teen has completed baptism at Holy Trinity, you do not need to submit a copy.

We will be having an orientation meeting on **Sunday, October 1 at 4:15 pm** in the **Parish Center Auditorium** for teens and their parents. A discussion of important information and schedules will be included during this meeting. This will be considered the first class and after this meeting, we will attend the teen Mass altogether at 5:25 pm. Each teen must have one adult with them at this meeting. Sponsors are always welcome to attend.

Attendance at Mass, class, retreats, and Rites is mandatory. Parents must call me at the above number if the teen is sick or cannot attend. Too many absences will cause the teen to repeat the first year again. The following Sunday after orientation, **October 8th**, the first-year teens will attend Mass at 5:25 pm followed by class. Teens must be picked up in front of the Parish Center at 7:30 pm. Park at the Sepulveda St. parking lot.

I look forward to meeting everyone on **Sunday, October 1 at 4:15 pm**. If you have any questions, please feel free to contact me at 310-548-6535 X 317.
God bless you and your family,

Dr. Joy Jones

Pastoral Associate / Director of Christian Initiation for Adults, Teens & Children
209 N. Hanford Ave.
San Pedro, CA 90732
310-548-6535 X 317

Teen RCIA & Teen Sunday Confirmation

Date: _____

Enrollment/Registration 2023-2024

We need a separate form for each Teen registering

Holy Trinity Parish
209 N. Hanford Ave., San Pedro, CA 90732
Dr. Joy Jones (310) 548-6535, Ext. 317

Teen's Name: _____
Last Name (PRINT) First Name Middle Date of Birth Sex

Address: _____ City: _____ Zip Code _____

Father's Name: _____ Mother's Maiden Name: _____

(Work) Phone # _____ Home: _____ (Work) Phone #: _____ Home _____

Cell Phone: _____ Cell Phone: _____

E-mail address _____ E-mail address _____

Sacraments received? YES _____ NO _____ Sacraments received? YES _____ NO _____

Parents married in the Catholic Church? YES _____ NO _____

Teen's email: _____ Teen's Cell Phone: _____

IMPORTANT: must provide a copy of the child's **Baptismal Certificate**

SACRAMENTAL INFORMATION:

Is the teen baptized? _____ Where? _____ When? _____

Has the teen made First Confession? _____ Where? _____ When? _____

Has the teen made First Communion? _____ Where? _____ When? _____

SPONSORS NAME 1. _____

HIGH SCHOOL NAME _____ GRADE (in September) _____

HEIGHT _____ WEIGHT _____ TEE SHIRT SIZE _____

Are you a registered Parishioner? **MUST USE PARISH ENVELOPES or E-GIVING** ? Yes _____ No. _____

TUITION PER FAMILY

_____ 1ST Year Class begins with Mass at 5:30 p.m.
and continues until 7:30 p.m.

_____ 2nd Year Class time begins at 3:45 p.m.
5:30 p.m. Mass is a requirement after class.

IN-PARISH REG.

\$100 (one child)
\$120 (two children)
\$140 (three or more)

OUT OF PARISH

\$110 (one child)
\$140 (two children)
\$170 (three or more)

Both sides must be completed

Person(s) authorized to sign Teen out of class (other than parent).

Name: _____ Phone _____ Relationship: _____

Name: _____ Phone _____ Relationship: _____

Name: _____ Phone _____ Relationship: _____

Medical Information

If there are any special needs for your teen due to physical or emotional difficulties please list: _____

Please list any medications your teen takes regularly: _____

Is your teen allergic to any medications: _____

Medical Insurance: _____

Physician: _____ **Phone:** _____

Emergency Contact (Local) Name: _____ **Phone:** _____

Authorization

I hereby certify that all information provided in this application is correct and if any information in this application changes the office will be notified. In case of an emergency, I authorize that my teen and this record be transported to a medical facility, and that emergency medical care be rendered as deemed necessary.

Parent Signature

Date

At certain times of the year TEEN RCIA classes will be showing "R" rated movies with religious contexts such as "The Passion of the Christ". We will discuss catholic moral issues that include sexual morality. I give permission to my teen to participate in these classes. Photos for identification and display in church and the bulletin will be taken.

Parent Signature

Date

FOR OFFICE USE ONLY

Payment information Hardship []

Payment Amount _____ Check No. _____ Cash [] Bal Due _____
