



**PREPARATION FOR THE SACRAMENT OF  
FIRST HOLY COMMUNION  
St. John the Evangelist Church  
Spencerport, NY**

**CALENDAR 2012**

**REGISTRATION DEADLINE:** Thursday, March 1, 2012

**A PRE-SACRAMENTAL PARENT-CANDIDATE INFORMATION SESSION by appointment only is a prerequisite for entrance into the program. At least one parent and the candidate must attend. Appointments may be scheduled by calling the parish office at 352-5481 on Monday through Thursday 9:00 am. -5:00 pm.**

**Pre-sacramental information session dates are as follows:**

**Tuesday February 21 through Thursday March 1 at the Parish center 1:00—5:00 pm.**

**First Holy Communion Sessions:**

Wednesday, March 14 (snow date Thurs.3/15)	Session #1 & Commitment Candidates/Parents	6:30-8:00 p.m. School Conf. Rm. A
Wednesday, March 28 (snow date Thurs.3/29)	Session #2 Candidates/Parents	6:30-8:00 p.m. School Conf. Rm. A
Wednesday, April 25	Session #3 Candidates/Parents	6:30-8:00 p.m. School Conf. Rm. A

**Weekend of April 28 & 29**

Celebrations at specified weekend liturgies begin

**\*Note:** Sunday May 6 liturgies are not available for booking for candidates in the Families GIFT program

**CELEBRATIONS:** at selected weekend liturgies (Sat. 5:00 p.m., Sunday 8:00, 9:30 & 11:00 a.m.) commencing April 28 & 29. Celebrations are to be scheduled in advance with a limit of **four** families celebrating at any one liturgy.

There is a **\$20 book/materials fee** for this Sacramental Preparation program. Please make checks payable to *St. John the Evangelist Church*. Payments must be made before candidate can receive his or her textbook.

**FIRST HOLY COMMUNION PREPARATION  
REGISTRATION FORM 2012  
St. John the Evangelist Church  
Spencerport, NY**

**\*Registration deadline: Thursday March 1, 2012**

CANDIDATE'S FULL BAPTISMAL NAME: \_\_\_\_\_  
(First, Middle & Last names please)

GRADE LEVEL: \_\_\_\_\_ Please check **one**: in Families GIFT program ( ) in Catholic School ( )

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

DATE OF BAPTISM: \_\_\_\_\_  
(month day year)

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

LOCATION OF CHURCH OF BAPTISM (City/town): \_\_\_\_\_

√ **Note: Parents must secure a sealed baptismal certificate before starting in the program if child was not baptized at St. John's Spencerport.**

Was First Penance celebrated? (check **one**): Yes \_\_\_\_\_ No \_\_\_\_\_ Month/ Year \_\_\_\_\_  
Church and location where First Penance was celebrated \_\_\_\_\_

***FAMILY INFORMATION***

FAMILY NAME (if different than candidate's last name): \_\_\_\_\_

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

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

PHONE NUMBER: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ Religion: \_\_\_\_\_

MOTHER'S NAME (**maiden**): \_\_\_\_\_ Religion: \_\_\_\_\_  
(first and last name please)

**OFFICE USE:** Date Received: \_\_\_\_\_ Date Interviewed: \_\_\_\_\_

Parish Registration: \_\_\_\_\_ Baptismal verification \_\_\_\_\_

\$20 Prep. Fee Received: \_\_\_\_\_



FIRST HOLY COMMUNION PREPARATION PROCESS  
ST. JOHN THE EVANGELIST CHURCH  
ROMAN CATHOLIC DIOCESE OF ROCHESTER

**CODE OF CONDUCT FOR MINOR CHILDREN  
INVOLVED IN PARISH PROGRAMS**

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The purchase, possession or consumption/use of alcoholic beverages or other illegal drugs will not be tolerated. Failure to comply will result in **immediate dismissal** from the event. This policy also applies to adult volunteers and chaperones.

Minors will not be allowed to smoke cigarettes or to use tobacco products, including chewing tobacco.

Participants are expected to obey the directions of adults in charge (catechists, youth group leaders, chaperones).

Participants are representing their parish community. Appropriate behavior and language are expected.

No dangerous or rough play will be tolerated.

Final decisions regarding acceptable behavior/consequences are the decision of the staff person in charge.

In general, if the behavior of a minor child results in his/her dismissal from the program, it is the responsibility of the parents/legal guardians to provide, at their own expense, transportation for the dismissed child. If a child is dismissed from an off site event and an adult chaperone must accompany the child home, the parents/legal guardian are responsible for any related expenses.



*In signing this Code of Conduct form, I hereby certify that I have read, understand, and will comply with the Code and, furthermore, I have reviewed the Code of Conduct with my child(ren).*

Signature of parent/guardian \_\_\_\_\_

Phone Number \_\_\_\_\_ Date \_\_\_\_\_

ST. JOHN THE EVANGELIST CHURCH  
FAITH FORMATION

**DISMISSAL RELEASE FORM**

First Holy Communion Preparation Process

I, \_\_\_\_\_ will pick up my son/daughter \_\_\_\_\_

from faith formation class. In the event I cannot pick up my child(ren) from faith formation class, I authorize the catechist/group leader to release my child(ren) to the following adults (Please remember to include the other parent/step-parent if appropriate):

Names _____	Phone _____
_____	Phone _____
_____	Phone _____
_____	Phone _____

I understand that whomever picks up my child(ren) must go to the learning space to collect him/her.

\_\_\_\_\_  
Signature of parent completing this form

\_\_\_\_\_  
phone number

\_\_\_\_\_  
Date