

St. Raymond RCIT

First Communion/Reconciliation Preparation for Teens

2017-2018

Welcome to sacramental preparation for youth at St. Raymond. This is a two year program for our young people to prepare them to receive the sacraments of Reconciliation and Eucharist. During the first year, the youth will attend their sessions (Weekly Sunday evenings for high school and Tuesday evenings for junior high). During the second year, they will continue with that weekly preparation and have an additional once a month session together with those specifically preparing for these sacraments on Tuesday evenings from 5:30-6:30, once a month. The teen will receive the Sacraments of Reconciliation and Eucharist in the spring of their second year. There is an additional sacramental fee for the RCIT program the second year the teen is registered.

Attached you will find the appropriate form to register for the new Faith Formation year. Please fill it out completely before returning it to the youth ministry office. N

God Bless You,

Shannon Rogers
925-574-7410
srogers@st-raymond-dublin.org

Mark your Calendar: Parent and Student Meeting

Jr High Parents/Teens- September 12th at 7pm in Moran Hall

High School Parents/Teens: September 10th at 7pm in Church

*****Teens who will be preparing to celebrate their Sacraments must also be enrolled in either Edge (middle school youth ministry) or Youth Group (High School Youth Ministry) *****

Our Mission: "To know Christ better and to make Him better known."

RCIT Sacrament Registration

2017-2018

This form is only to be filled out during the SECOND year of our program in addition to forms for Youth Group or Edge

Please Print

Teen/Pre-teen's

Name**:
_____ First Middle Last

Gender: _____ Date of Birth: _____ Grade entering in fall 2017: _____

Place of
Baptism*: _____ Date: _____
(Parish name, city and state)

Family Name: _____ Home Phone: () _____

Father:
_____ First Middle Last Cell#: _____

Mother:
_____ First Last Maiden Cell#: _____

Parents Language Preference (for communication purposes) _____

Fee for RCIT - \$60 (per teen). \$ _____
TOTAL DUE. \$ _____
Amount Enclosed. \$ _____
Balanced Due. \$ _____

For Office Use Only: Date Entered _____ Check # _____ Amount _____

**We must have a copy of your child's Baptismal certificate in order for them to receive any other sacraments. In order for us to process this form we must have a copy in our office.*