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**AN EXCITING NEW MINISTRY FOR OUR**

**YOUTH GRADES 4TH-12TH!**

**“DoCAT” is the Social Teaching Catechism of the Catholic Church for youth. Knowledge and understanding of the social doctrines of the Church helps guide our actions with truth, justice, and charity. As Christians we are called to actively work for greater justice in the world.**

**“Act justly, love mercy, walk humbly with the Lord.” Micah 6:8**

**The Pope’s Dream ~**

**“I wish I had a million young Christians who are for their contemporaries “walking, talking social doctrine.” Nothing else will change the world but people who with Jesus devote themselves to it, who go with him to the margins and right into the middle of the dirt.”**

**How to fulfill the dream?**

1. **READ…the DOCAT to enhance your understanding of the social teaching.**
2. **STUDY…in groups with friends and discuss how to tackle the issues around you.**
3. **DO…Go out to tackle the issues with Jesus and change your surroundings.**

**You are part of the dream! We will change ourselves, our surrounding, and with the help of the Holy Spirit, we can change the world!**

* **DOCAT – Faith in Action! is for students in the 4th-12th grade who have received their sacraments of initiation. Filled with the Holy Spirit, you are now sent out, equipped to go forth and be the hearts and hands of Jesus!**
* **DOCAT – Faith in Action! Meets on selected Wednesday evenings (15 Sessions), beginning in October 2019 through May 2020, from 6:00-8:00 pm in the RE Office located in the parish office building.**
* **THE VISION FOR THIS NEW MINISTRY: Using the DOCAT and its companion study guide and the Bible, we will explore the Catholic Social Justice teachings of the Church. During and after the study, you, the students will create and implement an outcome project. In other words – How can we change the world? – is the question that we will explore and put into action!**

**REGISTER TODAY! Turn page over for registration form**

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**Name of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_M \_\_\_\_ F \_\_\_\_\_**

**First MI Last**

**Date of Birth: \_\_\_\_\_\_\_\_\_\_\_Age \_\_\_\_\_\_\_ What Grade will you be in Fall of 2019: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of School Student Attends: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Primary mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Street City Zip**

**\*Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (this will be used to send out information for this program.)**

**\*Cell phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\*Please note: Your email address and Cell phone # will be added to the Assumption “Flocknote” account. Flocknote is a communication tool used to disseminate information quickly. I choose to opt out of Flocknote (initial here) \_\_\_\_\_\_\_\_***

**Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact Name/Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you have any health issues that we should be aware of, i.e. allergies, diabetes, seizures, learning disability, etc.? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* ***MATERIALS FEE FOR THIS PROGRAM: $30***
* ***PARENT LEADER: Yes, I am interested in being a parent helper/facilitator \_\_\_\_\_***
  + ***NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL PHONE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***
  + ***EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***PLEASE COMPLETE THIS REGISTRATIN FORM AND RETURN IT TO LINDA BLINCOW IN THE PARISH OFFICE BY SEPTEMBER 11, 2019 WITH THE $25 MATERIALS FEE. YOU WILL BE CONTACTED WITH THE DATES AND TIMES TO MEET!***

**CONTACT LINDA BLINCOW, DRE, IF YOU HAVE ANY QUESTIONS AND/OR ARE INTERESTED IN BEING A PART OF THIS WONDERFUL FAITH IN ACTION EXPERIENCE– 303-288-2442, EXT. 132 OR** [**lblincow@assumptiondenver.org**](mailto:lblincow@assumptiondenver.org)