

St. Matthew Faith Formation Department
Grades K - 7 Registration Form for 2020 - 2021

Family Last Name _____ Home Phone _____

Address _____ City _____ Zip Code _____

Mother's Information: _____ Religion: _____

First Name _____ Maiden Name _____ Last Name _____

Address (if different than above) _____

Email Address _____ Cell Phone/Work Phone _____

_____ **YES** I am in compliance and have taken the course, *Virtus Training Protecting God's Children*, a diocesan requirement for volunteering in the parish.

_____ **NO** I have not taken *Virtus Training Protecting God's Children* and would like information about the course.

Father's Information: _____ Religion: _____

First Name _____ Last Name _____

Address (if different than above) _____

Email Address _____ Cell Phone/Work Phone _____

_____ **YES** I am in compliance and have taken the course, *Virtus Training Protecting God's Children*, a diocesan requirement for volunteering in the parish.

_____ **NO** I have not taken *Virtus Training Protecting God's Children* and would like information about the course.

Emergency Contact Information:

Name _____ Phone _____

Relationship _____

Are you a registered member of St. Matthew Parish-

Yes _____ No _____ If not, you **must** register at the Parish Office before you can register your child in the St. Matthew Faith Formation Program.

Parent Signature Required

We typically take pictures of the children participating in various activities during Faith Formation classes. The photos may be used for the parish bulletin, parish bulletin boards, parish website and end of the year slide show. Please sign the appropriate line below:

_____ OR _____
Parent signature (Photos may be used) Parent signature (Photos may **NOT** be published)
(If this section is not signed we will assume that permission HAS been given).

1st Child's Full Name _____ Grade in Sept. _____

Date of Birth _____ School attending _____
Allergies or sensitivities? (i.e. foods, insects, chemicals?) No _____ Yes _____
Explain: _____
Special medical needs? No _____ Yes _____
Explain: _____
Does your child use an Epi-pen? No _____ Yes _____
*If yes, please contact us if your child requires an Epi-pen.
Any special modifications or support needed to be successful in the classroom? No _____ Yes _____
Explain: _____

2nd Child's Full Name _____ Grade in Sept. _____

Date of Birth _____ School attending _____
Allergies or sensitivities? (ie. Foods, insects, chemicals?) No _____ Yes _____
Explain: _____
Special medical needs? No _____ Yes _____
Explain: _____
Does your child use an epi-pen? No _____ Yes _____
*If yes, please contact us if your child requires an Epi-pen.
Any special modifications or support needed to be successful in the classroom? No _____ Yes _____
Explain: _____

3rd Child's Full Name _____ Grade in Sept. _____

Date of Birth _____ School attending _____
Allergies or sensitivities? (i.e. Foods, insects, chemicals?) No _____ Yes _____
Explain: _____
Special medical needs? No _____ Yes _____
Explain: _____
Does your child use an Epi-pen? No _____ Yes _____
*If yes, please contact us if your child requires an Epi-pen.
Any special modifications or support needed to be successful in the classroom? No _____ Yes _____
Explain: _____

4th Child's Full Name _____ Grade in Sept. _____

Date of Birth _____ School attending _____

Allergies or sensitivities? (i.e. Foods, insects, chemicals?) No ____ Yes ____

Explain: _____

Special medical needs? No ____ Yes ____

Explain: _____

Does your child use an Epi-pen? No ____ Yes ____

*If yes, please contact us if your child requires an Epi-pen.

Any special modifications or support needed to be successful in the classroom? No ____ Yes ____

Explain: _____

****** Please note that if your child misplaces their textbook there is a \$25 charge for an additional book**

Registration fee after July 17, 2020:

Payment for Pre-K and Kindergarten \$ each child _____

Payment for 1st child \$ 100 _____

Payment for 2 children \$150 _____

Payment for 3 or more children \$175 _____

Catechist discount (Yes / No) FREE

Total paid _____

_____ Cash _____ Check # _____ (Checks payable to St. Matthew Church) _____ Credit Card
(see below)

****** Please note that if your child misplaces their textbook there is an \$25 charge for an additional book**

Credit Card Payment instructions:

- Visit www.stmatthewnorwalk.org
- Click Donations on right side
- Click On Line Giving
- Create your account
- Under gift information – fund - Select Religious Education
- Enter the full tuition amount plus \$3.00 service fee

***** If you have a balance from the 2019-2020 school year, the balance must be cleared prior to applying payment to the 2020-2021 school year.**

**** If any of your children are new to the program please supply a copy of their Baptismal certificate if not celebrated at St. Matthew Church.**

**** First Reconciliation/First Eucharist is a separate registration form and will be emailed in late fall to all second grade students and older students who are eligible to receive in May 2021.**

The Faith Formation Program at St. Matthew Church consists of five parts:

1. Attendance at Mass, Holy Days of Obligation, Stations of the Cross and Adoration on First Friday. Weekly reception of the Eucharist and Reconciliation every three months for eligible members of the family.
2. Regular Faith Formation class attendance and appropriate behavior during class. Any absence requires a call from the parent/guardian. Five (5) class absences for grades 1-6, three (3) class absences for grades 7-8 or two (2) class absences for the Family Program, without prior notification may result in repeating the year. It is your child's responsibility to complete all assigned readings and homework should he/she be absent.
3. Volunteering in the Faith Formation program & family involvement in Parish life. (The Diocese requires all new volunteers in the Parish to attend a VIRTUS workshop. Please check the bulletin in the fall for workshops at St. Matthew Church)
4. All children are encouraged to be ministers at Mass. They may join the children's choir, altar servers, ushers and lectors.
5. Class Masses will be scheduled on a monthly basis at the 9:00 AM Mass. Attendance will be taken at class Masses. It is a requirement to attend with your family.

By registering my child for the Faith Formation program, I agree to all the requirements as stated above and in the registration letter.

Parent Signature _____ Date _____

Student Signature _____ Date _____

Student Signature _____ Date _____

Student Signature _____ Date _____

Payment Plan Options for 2020-2021 Class Year

3 Payment Plan Options for registration

PreK & Kindergarten only @ \$
1 child tuition @ \$100
2 children tuition @ \$150
3+ children tuition @ \$175

1. \$ _____ @ Registration Date Paid _____ Check # _____

2. \$ _____ by November 1st Date Paid _____ Check # _____

3. \$ _____ by February 1st Date Paid _____ Check # _____

By signing below, I agree to meet this payment schedule as presented above.

Parent signature

Date