

**St. Matthew Faith Formation Department**  
**PreK - Grade 5 Registration Form for 2024 - 2025**

Family Last Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ 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 slideshow. 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).**

**VOLUNTEER INFORMATION**

- Each family is requested to volunteer in the Faith Formation Program.
- Please select at least one:

Catechist

Substitute

Classroom Aide

Classroom Coordinator - (classroom Phone Chain, Contact bakers & volunteers for special events)

Hall Monitor

Baker for Special Events- Confirmation & First Communion

Help with Service Projects

Volunteer for Parish Events

Hospitality Committee (help to organize and run Sacrament Receptions & end-of-year party)

**STUDENT INFORMATION & CLASS TIMES for 2024-2025**

**PreK/K STUDENT INFORMATION & CLASS TIMES**

**PreK / K CLASSES WILL BE HELD ONCE PER MONTH on Sundays from 10:00AM -11:00AM ON THE FOLLOWING DATES: October 6th; November 3rd; December 8th; January 5th; February 2nd; March 2nd; April 27th; May 4th.**

**Please check the box below to register your child for this class.**

**SUNDAY PreK/K Class Time: 10:00AM-11:00AM**

.....  
**Gr. 1-5 STUDENT INFORMATION & CLASS TIMES**

**Gr. 1-5: Classes will be held once per week on either Sunday OR Monday.**

**Please CHOOSE ONLY ONE CLASS DAY - EITHER Sunday OR Monday by checking a box below.**

**SUNDAY Grades 1-5 Class Time: 10:00AM-11:00AM**

**OR**

**MONDAY Grades 1-5 Class Time: 5:00PM-6:00PM**

**1<sup>st</sup> 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: \_\_\_\_\_

\_\_\_\_\_

**2<sup>nd</sup> 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: \_\_\_\_\_

\_\_\_\_\_

**3<sup>rd</sup> 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: \_\_\_\_\_

\_\_\_\_\_

**4<sup>th</sup> 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:

\_\_\_\_\_

**Early Bird Registration fee prior to August 20, 2024**

Payment for Pre-K and Kindergarten \$65 each child \_\_\_\_\_

Payment for 1<sup>st</sup> child \$200 \_\_\_\_\_

Payment for 2 children \$225 \_\_\_\_\_

Payment for 3 or more children \$250 \_\_\_\_\_

Catechist discount (Yes / No) FREE

Total paid \_\_\_\_\_

\_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ (Checks payable to St. Matthew Church)

**Registration fee after August 20, 2024:**

Payment for Pre-K and Kindergarten \$ 75 each child \_\_\_\_\_

Payment for 1<sup>st</sup> child \$ 230 \_\_\_\_\_

Payment for 2 children \$275 \_\_\_\_\_

Payment for 3 or more children \$300 \_\_\_\_\_

Catechist discount (Yes / No) FREE

Total paid \_\_\_\_\_

\_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ (Checks payable to St. Matthew Church) \_\_\_\_\_ Credit Card  
(ONLINE)

**\*\* If you have a balance from the 2023 - 2024 school year, the balance must be cleared prior to applying payment to the 2024 – 2025 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 it in May 2025.**

## **PROGRAM DESCRIPTION**

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

1. Attendance at Mass with Class, 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. It is your child's responsibility to complete all assigned readings and homework should he/she be absent. There will be online assignments for those that miss class.
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. Gr. 1-5 Weekly Class either on Sunday from 10:00am-11:00am, or Monday from 5:00pm-6:00pm, and once-per-month we will have a Faith Formation Mass BY GRADE at 9:00am. (dates below):

### **2024 9:00am Class Masses**

**September 22nd: Faith Formation Welcome Mass for All Grades.**

**October 6: 1st and 2nd Grades**

**October 20: 3rd, 4th and 5th Grades**

**November 3: PreK / K & 1st Grades**

**November 17: 2nd & 3rd Grades**

**November 24: 4th and 5th Grades**

**December 8: All Grades**

### **2025 9:00am Class Masses**

**January 5: PreK / K & 1st Grades**

**January 12: 2nd & 3rd Grades**

**January 26: 4th and 5th Grades**

**February 2: PreK / K & 1st Grades**

**February 9: 2nd & 3rd Grade**

**February 23: 4th and 5th Grades**

**March 2: PreK / K & 1st Grades**

**March 9: 2nd & 3rd Grades**

**March 16: 4th and 5th Grades**

**April 27: ALL GRADES**

**May 4: ALL GRADES - CONCLUDING MASS / COFFEE AND.....**

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 2024-2025 Class Year**  
**3 Payment Plan Options for**  
**Early Bird registration prior to August 20, 2024**

Pre K & Kindergarten only @ \$65 = 2 payments of \$32.50

1 child tuition @ \$200 = 2 payments of \$100

2 children tuition @ \$225 = 2 payments of \$112.50

3+children tuition @ \$250 = 2 payments of \$125

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

2. \$ \_\_\_\_\_ by November 1<sup>st</sup> Date Paid \_\_\_\_\_ Check # \_\_\_\_\_

3. \$ \_\_\_\_\_ by February 1<sup>st</sup> Date Paid \_\_\_\_\_ Check # \_\_\_\_\_

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

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date

**3 Payment Plan Options for registration after August 20, 2024**

Pre-K & Kindergarten only @ \$75 = 2 payments of \$37.50

1 child tuition @ \$230 = 2 payments of \$115

2 children tuition @ \$275 = 2 payments of \$137.50

3+ children tuition @ \$300 = 2 payments of \$150

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

2. \$ \_\_\_\_\_ by November 1<sup>st</sup> Date Paid \_\_\_\_\_ Check # \_\_\_\_\_

3. \$ \_\_\_\_\_ by February 1<sup>st</sup> Date Paid \_\_\_\_\_ Check # \_\_\_\_\_

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

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date