

Sunday (9:15am-10:15am) K-5th Grade _____

Wednesday (6:00pm-7:30pm) Middle & High School



Family Faith Formation Registration Form

Fee: \$90 per family

Family Last Name (please print)	Family email address (please print)	St. Matthew Parish Registration Number/Envelope #
<input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Phone number/Mobile

**Please list each family member's full name, Grade, Sacraments received along with date and Church name
For sacramental classes, copies of previous sacramental certificates MUST be turned in with this form.**

Parent/Guardian Name (Father)	Incoming Grade	Baptism	First Holy Communion	Confirmation	Marriage (Catholic or Civil)
Parent/Guardian Name (Mother)					
Student / Child #1					
Student / Child #2					
Student / Child #3					
Student / Child #4					
Student / Child #5					

Notes or additional emails / phone numbers

(Must complete both side of this registration form)

Regular Registration June 1, - August 30, 2016

Family Catechesis Fee: \$90 (Scholarships are available on a limited basis; please schedule an appointment with Fr O'Brien to discuss.)

Date _____ Amount Paid _____ Balance Due \$ _____ Check ____ CC _____

Date _____ Amount Paid _____ Balance Due \$ _____ Check ____ CC _____

Please Note: Due to safety concerns no child between the grades of K-5 may be left without parental presence. Parents must stay in the Parish Hall and attend the Sunday Adult Faith Formation class. Parents of any unsupervised children will immediately be called to pick up their child and reoccurring incidents will be grounds for disenrollment from Faith Formation.

The family fee covers all members of the immediate family, including the parents. Parents are encouraged to take the Sunday Adult Faith Formation Class or to be yDisciple Mentors on Wednesday nights. If you have any questions you can make an appointment with Richard or Michele at thepastorscalendar.com or by calling (863)324-3040.

Emergency contact person:

_____ **Full Name** _____ **Phone** _____ **Relationship**

Comments:

Medical and Insurance Information

Medical Permission Form

I grant permission for the administration of First Aid to my children, by the people in charge of **Saint Matthew Faith Formation Program**, and to make the necessary referrals to qualified physicians for treatment of illness or accident of a more serious nature. I understand I will be promptly notified in the event of any serious illness or accident and prior to any major surgery, except when delay in such communication would endanger life. In case of medical emergency, I understand that every effort will be made to contact the parent/guardian of the participant. In the event that I cannot be reached, I hereby give permission to the physicians selected by the adult staff to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery, if deemed necessary for my child.

Student Name	Allergies? Y/N	If yes, please describe:	Medication(s) currently taking:

Insurance Information

Policy in the name of: _____ Insurance Company: _____ Policy Number: _____
 Identification Number: _____ Authorized Physician: _____ Phone: _____

Videotaping and Still Photographs

Video and still photographs may be taken during this event. This authorization form constitutes permission for my child's participation in the videotape and/or still photographs, which may be used for future ministry promotional efforts ONLY. If you have any further questions or concern please contact the Faith Formation office at 863-324-3040.

Safe environment

We are responsible to provide educational materials about child sexual abuse to parents as part of our compliance with the USCCB Charter for the Protection of Children and Young People. Information about child sexual abuse and prevention and internet safety is now available on-line for your review at www.orlandodiocese.org . We invite you to visit these links and become informed on this topic. If you do not have access to the internet in your home, public libraries typically offer access to the internet or your parish contact may be able to assist you with other opportunities to access this information. We thank you for helping to create a safe environment by your kind attention to this information.

Parent/Guardian Signature _____ **Date** _____