

# GRADES Kindergarten - 8

## St. Matthew Catholic Church Religious Education Registration (2024-2025)

For Office Use:	
Date Registered	Check #
Tuition Total	Amount Paid

FAMILY NAME: \_\_\_\_\_ Father's Name \_\_\_\_\_ Religion \_\_\_\_\_  
 Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_

**ARE YOU A REGISTERED PARISHIONER AT ST MATTHEW'S?**  Yes (Please note only registered parishioners may register for Religious Education)

Address \_\_\_\_\_  
Number & Street City Zip Code

email: \_\_\_\_\_ Daytime Telephone: \_\_\_\_\_  
Father Mother

Parents Marital Status:  Married  Separated  Divorced  Widowed  Single

Child(ren) resides with:  Both Parents  Mother  Father  Other (Specify name & relationship) \_\_\_\_\_

Correspondence should be addressed to:  Mr. and Mrs.  Mr.  Mrs.  Ms.  Miss \_\_\_\_\_

Was your family registered with the St Matthew RE Program during the 2023-2024 academic year?  Yes  No  
 If no, where enrolled: \_\_\_\_\_

**Please CHECK if your child has received:**

	Student's Full <b>Legal</b> Name		Nickname	Date of Birth	Grade entering Fall 2024	Baptism	First Confession	Holy Communion	Confirmation
	Last	First							

Please note any allergies, medications, special learning requirements, or other pertinent information.

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**CLASS TIMES:**

<b>Grades K-4</b>	<b>Tuesday</b>	<b>5:00-6:15 p.m.</b>
<b>Grades 5-8</b>	<b>Wednesday</b>	<b>6:00-7:15 p.m.</b>
<b>Sacrament "Catch up" Class</b>	<b>Wednesday</b>	<b>6:00-7:15 p.m.</b>

**TUITION:\***

One Child	\$ 90.00
Two Children	\$ 150.00
Three or More Children	\$ 180.00

\* If you volunteer to be a Catechist, Aide or Safety Monitor and are assigned a position the Tuition Fee is waived.

Please make check payable to *St. Matthew*. Registration form and payment may be dropped off or mailed to:

St. Matthew Religious Education Program  
8200 Robert E Lee Drive  
Spotsylvania, VA 22551  
540-582-5575

The success of our Religious Education Program depends on many volunteers.

I will help with the following:

CATECHIST                       CATECHIST AIDE                       SAFETY MONITOR

NAME \_\_\_\_\_ GRADE \_\_\_\_\_ DAY \_\_\_\_\_