2023-2024 CONFIRMATION Enrollment Agreement

My name is:		Year	2
	se print your full legal name		
I realize that the follow that if I do not complet	ving items are the requirements of the St. Matthew Confirmation te all of these requirements, I will be asked to repeat this year of	program. I un preparation.	nderstand
classes and Weekend I	gram at St. Matthew Church is a 2-year program which consists of Mass attendance. Youth wishing to prepare for Confirmation mass/retreats and Mass along with other requirements.	of Faith Form ust attend all	ation classes,
Mass while enro 2. Attend Confirm will be expected missed sessions Pastor.Retreat re (a) While in responsi 3. I will complete a Enrollment Agra 4. I will respect all 5. I will dress appr body - front & b 6. I will not wear a 7. I will remove ea Class. 8. I will choose a S journey. All pag 9. I understand tha influence of drug	the Confirmation program, I need to attend 1 Retreat each year. bility to keep track of whether I attend a Retreat. Dates Not Yet all registration paperwork and turn in to the Youth Ministry Officements before classes start on September 13 th session. Catechists/Volunteers as well as St. Matthew Church & Student copriately for both classes and Massi.e., no torn jeans; crop tops back. I hat, beanie or hoodie at Mass where the both class and Mass at all times & will not use my phoson for both class and Mass at all times & will not use my phoson will be turned in before December 1, 2023. It St. Matthew Church has a NO bullying policy and that the use gs or alcohol during any St. Matthew event or session is strictly ed in the community at St. Matthew Parish by completing no less	any other reance. After the for the lit will be my Set. ce and sign the lis. s, shirts must one while at line accompany to of or being uprohibited.	son, I ree y nis cover the Mass or me on my nder the
I agree to the above requestions of the second section of the second sec	uirements and will be responsible for contacting Alicia Quinter 272-3520, via Class Remind, or e-mail - aquintero@sbdiocese. of these requirements.	o at the Youth org if I have:	1 a
I have read and understand parent are required below		youth and at	
Student Cell No:	E-Mail:		
Youth Signature:	Date:		

E-Mail: aquintero@sbdiocese.org

St. Matthew Faith Formation Program

2023-2024



Input PS	

Registration – Youth Ministry/Confirmation 7th, 8th, & 9th ~ Monday 6:30pm-8pm; Year 1 or Year 2 ~ Wednesday-7pm-8:30pm

Office Use Only Date: # of Children RE Family Last Name: Amount Due \$ RE \$ Address or PO Box: City: Zip code: ______

Home phone #: _____ Cell phone #: _____ Amount Paid \$ RE \$ __RE \$_ Balance Due \$ Cash Check # Card 7th 8th 9th Year 1 Year 2 E-mail: Preferred Language: Catechist fee waived If child has different Last Name(s): ====PLEASE PRINT & SIGN BELOW FOR PROGRAM ENROLLMENT=== I agree to all of the guidelines for Registration and Attendance for my child at St. Matthew Family Religious Education Program. Print Father's Name: _____Print Mother's Name: _____ Father's Signature: _____ Mother's Signature: _____ Cell Phone:() Cell Phone: () Cell Phone:(Other Phone: () ====== STUDENT INFORMATION (Grades 7th-12th ONLY) ========= Please select: Monday 7th [] 8th [] 9th [] or Wednesday Year 1 [] Year 2 [] Grade in Fall 2023 Birthdate: _____-___-Baptized: Date_____ Church_____ Sacraments Completed []*Baptism []1st Reconciliation []1st Eucharist []Confirmation *Must be a Roman Catholic Baptism. Please contact the office if you are unsure. Please select: Monday 7th [_] 8th [_] 9th [_] or Wednesday Year 1 [_] Year 2 [_] _____Grade in Fall 2023 _____ Full Name: Birthdate: _____-_ Baptized: Date Church Sacraments Completed [___]*Baptism [____]1st Reconciliation [____]1st Eucharist [___]Confirmation *Must be a Roman Catholic Baptism. Please contact the office if you are unsure. Please select: Monday 7th [] 8th [] 9th [] or Wednesday Year 1 [] Year 2 [] Grade in Fall 2023 Birthdate: - -Baptized: Date_____ Church_____ Sacraments Completed [___]*Baptism [____]1st Reconciliation [____]1st Eucharist [____]Confirmation *Must be a Roman Catholic Baptism. Please contact the office if you are unsure. Health Problems: YES, I allow my child(ren)'s photograph to be taken, and used in church media (bulletin, Facebook, etc.) Print Parent's Name:

Parent's Signature:_____

_Date: _____

YOUTH MINISTRY (GRADES 7th - 12th) EMERGENCY FORM

This form is necessary for enrollment and must be submitted at registration.

(First Name)	(Parent or Guardian's Signature)	(Print Full Name)	(Date)
(Grade)	(Family Name if different)		
(First Name)	(Parent or Guardian's Signature)	(Print Full Name)	(Date)
(Grade)	(Family Name if different)		
(First Name)	(Parent or Guardian's Signature)	(Print Full Name)	(Date)
(Grade)	(Family Name if different)		
	City Zip code	Telephone # or Cell #	#
youth be permitted of the guidelines ou wer my phone or the em ent of these medical ser	to attend <u>St. Matthew Youth Ministry</u> Itlined in the Registration Packet and agruergency contacts listed below are not available, I givices. Please Initial ().	/Confirmation Classes. ee to the emergency instructive St. Matthew's permission to seek	ions. medical care for
Youth to pick up your you Contact Barron:	oth parents) (Mom) (Other)	
Contact Person:	Can this per	son pick up youth from class?	Yes () No ()
t order, we will assume t pecific custody restriction	hat both parents have custody of the youth. If there s is must be verified by providing us with a copy of the C RISH OFFICE USE ONLY)	are problems of custody which might in OURT ORDER.	nvolve St. Matthew
e of parent or guar	dian Print Full Name	<u>Date</u>	Time
	First Name) First Name) First Name) First Name) First Name) First Name F	Print 1" Youth's (Last Name) (First Name) (Family Name if different)	ian's Signature) Print Full Name (Print Full Name) (Print Full Name) (Print Full Print Full Print Full Name

Due September 10, 2023

Confirmation Year 2 Interview

Name	Date
Personal information: Family that lives School Grade: Clubs, sports, activities, job:	with youAge
2. Three Words that descibe yourself:	
3. Service Hours: Must be completed By : How many service hours need to be completed for service hours?	eted this year? What are some of your ideas
4. Do you want to be Confirmed? Why or w	hy not?
5. Saint Name: What Saint Name dld you o	
6. Sponsor: Who/relationship to you? Why	did you choose him/her?
Three words that describe your sponsor:	
7. Are you attending mass on a regular basis	s? Why or why not?
. What is the name of the current Pope?	
. What is the name of our Bishop and our P	riests at St Matthew?
0. Please list 3 things you know about Mary	(The Blessed Mother).

_	. Please list 3 things about Jesus.
12	. What is your definition of a Sacrament?
13	. How many Sacraments are there? Please name them.
14.	How many Gospels are there? Please name them.
15.	Please explain the Trinity (Santísima Trinidad).
16.	How many original apostles were there? Please name as many as you can
17.	Where do you see God working in your life?
8.	Have you lived your AE Retreat? What was your experience like?
	What kind of learner are you? (<i>visual, audio, like group work, like lecture.</i>) can we help you to learn the information more easily?
	Name some of the ministries you have been involved in at the Church? ne some other ministries you might be interested in getting involved in.