**Good Shepherd Cluster**

**K-8 Faith Formation and**

**St. John’s School of Religion**

**2025-2026**

  

Registration Packet

Please fill out all parts of this packet:

Section One: Family Contact Information \_\_\_\_\_

Section Two: Student Information \_\_\_\_\_

Section Three: Consent Forms \_\_\_\_\_

Section Four: Tuition Payment Information \_\_\_\_

Sacramental Preparation Registration (If applicable) \_\_\_\_

Copy of Baptism Certificate (New students/Sacramental Prep. only) \_\_\_\_

Volunteer Opportunities Form \_\_\_\_

**Please return completed packet by August 29th, 2025**

**Good Shepherd Cluster**

**Wednesday Night Faith Formation Program, Home Faith Formation Program, and St. John’s School of Religion**

**Registration 2025-2026**

**Family Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section 1: Family Contact Information**

|  |  |
| --- | --- |
| Father's Full Name: | Religion: |
| Mother's Full Name: | Religion: |
| Mother's Maiden Name: |  |
| Address: (Custodial Parent) | City: |
| State/Zip | E-mail: |
| Home Phone: | Other Phone: |
| Non-custodial Parent (If applicable): | Religion: |
| Address: | City: |
| State/Zip: | E-mail: |
| Home Phone: | Other Phone: |
| **EMERGENCY CONTACT:** | **RELATIONSHIP:** |
| **HOME PHONE:** | **OTHER PHONE:** |

Please indicate the name and address of who you would like any mailings to be sent to (if dual parent):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Children/Youth to register:First, Middle, and Last Name | Birth Date | Sex |  School | Grade | Baptism | Reconciliation | Eucharist | Confirmation |
| 1. |  |  |  |  | Yes/No | Yes/No | Yes/No | Yes/No |
| 2. |  |  |  |  | Yes/No | Yes/No | Yes/No | Yes/No |
| 3. |  |  |  |  | Yes/No | Yes/No | Yes/No | Yes/No |
| 4. |  |  |  |  | Yes/No | Yes/No | Yes/No | Yes/No |
| 5. |  |  |  |  | Yes/No | Yes/No | Yes/No | Yes/No |

**Section 2: Student Information**

**Please write in the names of each student attending each program:**

Wednesday Night 6:00-6:45 PM- Open to Grades K-8\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

St. John’s School of Religion- Open to grades 9-12\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do any of the students enrolled have chronic illnesses or physical limitations?

 Yes No

Do any of the students have any type of learning difficulty?

 Yes No

Do any of the students attend special education classes or utilize a 504 or IEP Plan in their public school?

 Yes No

**If YES to any of these questions:** please give the name of the child, any information we may need and how we can help:



 

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If you are new to our program:** please indicate the level of prior Faith Formation training and any other information you feel would help us in working with your child/children and include a **copy of each child's Baptismal Certificate (If Baptized outside of the Good Shepherd Cluster):**





**Section 3: Consent Forms:**

|  |
| --- |
| I understand that by signing this Release and Authorization I hereby grant authority toGood Shepherd Cluster/St. John’s School of Religion for the use of any videos, photographs, or similar items in which my child/children might appear, or statements made by them, in the production, display, or sale of public service announcements.  Parent/Guardian signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**MEDIA RELEASE AND AUTHORIZATION**

**Annual Consent Form/Liability Waiver:** Please make sure to fill out a separate annual consent form (additional sheet in packet) **for each individual student.**

**I authorize the following to pick up my children (any non-parent/guardians who plans to pick up the children MUST be listed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section 4: Tuition Payment Information**

Tuition for the 2025-2026 Year:

 **For Wednesday Night Program: For St. John’s School of Religion:**

|  |  |
| --- | --- |
| Fee per student: | Fee per student: |
| $75 Grades K-8 | $125 |

**Payment Options:**

1. Pay entire tuition balance at time of registration
2. Pay ½ Registration (1/2 with Registration and ½ January 12th)
3. Pay 1/3 Payment Schedule (1/3 with registration, 1/3 by Nov. 3rd, and 1/3 by Feb. 2nd)

(The Faith Formation Office will do their best to send reminders as needed. Please do your best to have all payments returned by February 2nd at 4:30 PM!)

**Your Payment Plan (Please fill out):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of Students** | **Total Tuition Due** | **Your Payment Option** | **Payment with Registration** |
|  |  |  |  |

**\*Make Checks Payable to YOUR PARISH (Holy Family, Immaculate Conception, or St. Boniface) Check #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Payment may also be made online at goodshepherdcluster.com by clicking the “Give” tab. Please be sure to note what programs you are paying for specifically when paying online.**

**Financial assistance is available to help cover tuition costs. If your family would like to utilize this option, please contact Jayden Burke, Director of Faith Formation to receive a Financial Aid Application Form.**



**For Parish Office:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Payment Options** | **Amount Per Payment** | **Check Number** | **Date** |
| Option #1  | full amount Registration: |  |  |
| Option #2 | ½ Registration:½ January 12th: |  |  |
| Option #3 | ⅓ Regeistration:⅓ November 3rd:⅓ February 2nd:  |  |  |

**Good Shepherd Cluster, Sacramental Programs**

**Registration 2025-2026**

*(Please fill out one form for each individual student enrolling in Sacrament Preparation)*

**Student Information:**

Student's Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_ Family Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Information:**

Father's Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother's Full Name (Plus Maiden): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sacraments Student is Registering For:**

First Reconciliation and First Eucharist: \_\_\_\_\_

Confirmation: \_\_\_\_\_\_\_

**Prerequisites:**

It is a parish policy that a student wishing to begin Sacramental Preparation must have been enrolled in either Catholic School or Faith Formation at least **one year prior to beginning their preparation.** Please indicate where your son/daughter has attended either Catholic School or Faith Formation during the 2020-2021 school year here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous Sacraments:**

Please indicate where your son/daughter has received:

Baptism: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parish Name City/State Date

**If other than the Good Shepherd Cluster, please include a copy of their Baptismal Certificate**

Eucharist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parish Name: City/State Date

Reconciliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parish Name: City/State Date

**Materials Fee: Please make checks out to the Good Shepherd Cluster!**

**First Reconciliation/First Eucharist: $55.00**

**Confirmation: $25 One-time payment in grade 10 or 11**

**Your materials fee must be paid in full when you turn in your registration. The *Materials fee will be processed totally separate from Faith Formation/St. John’s Tuition.* If you have a student in our Wednesday Night Faith Formation or St. John’s Program, you will need to write a separate check for any Sacrament Materials fees. Return registrations by August 29th, 2025, to the Good Shepherd Parish Office. Financial Aid is available upon request.**



For Business Office:

Total Students Registered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Payment Received: \_\_\_\_\_\_\_\_\_\_\_\_

Total Materials Fee Due: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Volunteer Opportunities**

Good Shepherd’s Faith Formation Team is seeking faith-filled adults who wish to help us serve the children and youth in our Parishes through the Wednesday Night Faith Formation Program. Check out the opportunities below!

**Wednesday Night Faith Formation Program**

**Catechist**

Catechists teach a specific grade in our program most Wednesday night during the school year. Catechists are provided with a Handbook, and a Teacher’s Guide. Catechists must be Confirmed, in good standing with the Church, and committed to accurately presenting the teachings of the Church to our children and youth.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Preferred: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Classroom Aide**

Classroom Aides assist the Catechist during class: gathering supplies, helping maintain order, etc. Classroom Aides are also provided with a Handbook, and Teacher’s Guide.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Preferred: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Substitute Catechist**

Ideal for those with a busy schedule, but a desire to share their faith with others! Materials and lesson plans are given in advance to help you prepare!

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Youth Ministry Helper**

Youth Ministry Helpers assist in planning events, gathering supplies, supervising youth, and if desired, leading activities for either our Middle or High School Youth Ministry Programs. Ideal for anyone who wishes to be a role model for youth, without the responsibility of teaching.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle or High School Program (Circle One)