PSR REGISTRATION Please print

FEES: \$85 per child *(\$130 2 or more) Registrations Due by May 11, 2018

ONE WEEK SUMMER SESSION

Assigned
Computer
Permanent Record
Mary
Date Received
Fees Paid

JUNE 4-8, 2018 8:45 am – 2:00 pm GRADES 1, 3, 4, AND 5 Must Attend Every Day to Earn Credit Absent Only with Doctor's Note

Returning Student (Attended La	ast Year) () or New Student ()		
Student's Name				
=	Last	First Name	Nickname	Family Name if different
Address				
	Street	(City	Zip Code
Home Ph		_		
Grade Entering		_ MALE () FEMALE () SCHOOL		
Children entering Fin SPECIAL REQUE	0			

Fill Out Sacramental and Parent Sections Only If Information Has Changed.

SACRAMENTAL INFORMATION

DATE OF BIRTH/_/ Place of Birth(City & State)							
BAPTISM (Denomination			_Name of Church City & State				
1 ST CONFESSION	Yes () No ()	Date	_Name of Church				
1 ST EUCHARIST	Yes () No ()	Date	Name of Church				
CONFIRMATION	Yes () No ()	Date	_Name of Church				

Father's Name	Last	First			Home Ph
Address (if different)	Street	City	Zij	p Code	Cell Ph
Mother's Last Name		First Name		Maide	n Name
Email		Но	ome Ph		Cell Ph
Address (if different)	Street	City	Zij	p Code	Business Ph

VOLUNTEER OPPORTUNITIES

Teacher () Teacher Assistant () Substitute Teacher ()

Lunch Room Helpers () Game Helpers () Parking Lot Dismissal ()

Craft Helpers () Teacher Appreciation ()