

PSR REGISTRATION

Please print

**FEES: \$90 per child *(\$135 2 or more)
Registrations Due by May 8, 2020**

ONE WEEK SUMMER SESSION

JUNE 1-5, 2020

Must Attend Every Day to Earn Credit

9:00 am – 1:00 pm

Absent Only with Doctor's Note

GRADES 1, 3, 4, AND 5

Assigned _____
Computer _____
Permanent Record _____
Mary _____
Date Received _____
Fees Paid _____

Returning Student (Attended Last 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 First grade must be able to read.

SPECIAL REQUESTS OR NEEDS _____

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

SACRAMENTAL INFORMATION

DATE OF BIRTH ___/___/___ Place of Birth(City & State) _____

BAPTISM Yes () No () Date _____ Name of Church _____
 (Denomination _____) City & State _____

1ST CONFESSION Yes () No () Date _____ Name of Church _____

1ST EUCHARIST Yes () No () Date _____ Name of Church _____

CONFIRMATION Yes () No () Date _____ Name of Church _____

Father's Name _____ Home Ph _____
Last First M.I.

Address (if different) _____ Cell Ph _____
Street City Zip Code

Mother's Last Name _____ First Name _____ Maiden Name _____

Email _____ Home Ph _____ Cell Ph _____

Address (if different) _____ Business Ph _____
Street City Zip Code

VOLUNTEER OPPORTUNITIES

- Teacher ()
- Teacher Assistant ()
- Substitute Teacher ()
- Lunch Room Helpers ()
- Game Helpers ()
- Parking Lot Dismissal ()
- Teacher Appreciation ()