

St. Mary's Parish School of Religion

Student Registration Form

Grade: _____ Today's Date: _____

Student's Name: _____

Student's Birth Date: _____ (month/day/year)

Address: _____

| | | |
|------|-------|-----|
| City | State | Zip |
|------|-------|-----|

Phone Number: _____

E-Mail Address: _____
(Please print clearly)

Student Lives with (circle one): Both Parents Father Mother Other

Father's Name: _____ Cell Number: _____

Mother's Name: _____ Cell Number: _____

PSR will be taught online this year. Do you have the needed internet connectivity and available technology at your home? Yes No

Are there any special needs/problems concerning your child of which the school should be aware:

Are you a registered member of St. Mary's Parish? Yes No

If No, which Catholic Parish are you registered with? _____

I/We understand that St. Mary's Religious Education Classes meet every Sunday, September through May (excluding holidays) online and that punctuality and regular attendance are strongly encouraged.

Date: _____ Signature: _____
Parent/Guardian

****** Please include a \$25.00 registration fee for each student ******

***** Late Fee additional \$10 after August 31, 2020 *****

Office use: Date Amount _____
Received: _____ Received: _____ Ck #/Cash: _____ Initials: _____

For New Students Only
Please fill out Sacrament Information

Sacraments

Baptism: _____
 Month Day Year

Church: _____

Address: _____

Reconciliation: Yes No

Church: _____

Address: _____

First
Communion: _____
 Month Day Year

Church: _____

Address: _____

**** New Students: Please attach a copy of Baptismal Certificate ****