

**ST. TERESA / ST. WILLIAM REGIONAL
PARISH SCHOOL OF RELIGION (P.S.R.)**

Registration Form for 2017-18

Family Information

Family Name: _____

Father's Full Name: _____

Mother's Full Name: _____ Maiden Name: _____

Home Mailing Address: _____

Home Ph. #: _____ Emergency Contact Phone #: _____

Whose number is the emergency contact? _____

Email Address (that is check frequently) _____

Who is responsible for child's religious education? Father _____ Mother _____ Both _____

Has the responsible party listed above received the *Sacrament of Baptism*? Yes / No

If yes, where and when? Father: _____

Mother: _____

Are you a registered member of St. Teresa Parish? Yes / No

If yes, what is the number on your parish envelopes? _____

If no, in which parish are you a registered member? _____

Due to the continued generosity of parishioners of St. Teresa, the fee for the Monday evening program will be \$60 for one child, \$100 for two children and \$125 for three or more children. The fees for those who are not members of St. Teresa or St. William parishes will be \$80 for one child, \$140 for two children and \$185 for three or more children. The Sunday morning program will continue to be \$30 per child.

***Complete "Family Information" on this side once regardless of the number of children attending.**

(Over)

Student Information

(Complete this side for each child-contact office for additional forms)

Name of Child (Full): _____

Birth Date: _____ City/State: _____

School Attending: _____ School District: _____

Elementary Grade as of September 2017 (Preschool through 8th) _____

Is this your child's first experience of religious education in a Catholic parish? Y / N

How long has he/she attended St. Teresa PSR? (Number of years) _____

Has he/she attended religion classes at another Catholic parish? Y / N
Number of years attended? _____

Name of parish? _____

Sacramental Records

(The following information is necessary to assist catechists in their efforts to assess each child's readiness to receive the sacraments.)

The Sacrament of Baptism:

Did he/she receive the sacrament? Y / N At St. Teresa? Y / N or St. William? Y / N

If he/she was baptized at another church please name: _____

****If baptism did not take place at St. Teresa or St. William a Baptismal Certificate required.***

The Sacrament of First Reconciliation: (If your child is in third grade or above)

Did he/she receive the sacrament? Y / N Date received: _____

At St. Teresa? Y / N or St. William? Y / N

If he/she received at another church please name: _____

The Sacrament of First Eucharist: (If your child is in third grade or above)

Did he/she receive the sacrament? Y / N Date received: _____

At St. Teresa? Y / N or St. William? Y / N

If he/she received at another church please name: _____