

# Mother of Perpetual Help Church

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## PSR Registration Form For School Year 2017-2018

### 1) STUDENT INFORMATION:

Name of Student:	Date of Birth:	Name of School:	Grade for 2017-2018:	How long has your child been in PSR:	Check which Sacraments your child has already received:	Year of Baptism:	Church of Baptism:	Does your child need any special considerations?
1.					<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation			<input type="checkbox"/> Yes <input type="checkbox"/> No
2.					<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation			<input type="checkbox"/> Yes <input type="checkbox"/> No
3.					<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation			<input type="checkbox"/> Yes <input type="checkbox"/> No
4.					<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation			<input type="checkbox"/> Yes <input type="checkbox"/> No
If "yes", please explain:								
Is your family registered with MPH as parishioners? <input type="checkbox"/> Yes <input type="checkbox"/> No			Does your family attend Mass on a regular basis? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you interested in helping with PSR as either a teacher or an aide? <input type="checkbox"/> Yes <input type="checkbox"/> No		

[ For Office Use Only ]

The fee for PSR this school year is \$35 per student, with a \$70 per family limit.

Cash or Check #:

Amount Paid \$:

Date:

Initials:

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*PSR Registration Form  
For School Year 2017-2018*

## **2) PARENT INFORMATION:**

	Father	Mother
Name:		
Address:		
City, Zip:		
Home phone:		
Other phone:		
E-mail:		

## **3) PARENT RESPONSIBILITY**

*I, as a Catholic parent or guardian, accept my serious responsibility of providing for the spiritual and religious formation of my child. Knowing that parental example is the strongest possible teaching tool, I accept this responsibility by actively being involved in the religious formation of my child. In addition, I will provide the opportunity for our family to worship at Mass each Sunday. I further certify that the children to be enrolled are members of Mother of Perpetual Help Parish and have been baptized.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **4) SAFETY PICK-UP**

Please list the names and phone numbers of the people (besides yourself) that you allow to sign your child out of PSR and take him/her home.

Name:			
Relationship to child:			
Phone number:			
Other Phone number:			