

**Church of the Blessed Sacrament  
Religious Education Registration Form  
Sunday School (PSR) 2010-2011**

**Contact Information**

Family Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

(please provide an email address, as most information is sent via email)

**Parent/Guardian Information**

Mother: \_\_\_\_\_

Father: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Marital Status: \_\_\_\_\_

**Emergency/Medical Information**

Emergency Contact Name, Relationship: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Pertinent Information (Medication/Food Allergy/Learning Disabilities) the PSR staff should be aware of: \_\_\_\_\_

**Registration Fee**

Is the family registered in Blessed Sacrament parish? (Y/N) \_\_\_\_\_

If not, where? \_\_\_\_\_

A registration fee of \$10 per family will be charged for those who are registered members of the parish (parishioners). The registration fee for any children whose family is not registered in the parish (non-parishioners) will be \$25 per child.

Please return to the parish office when complete.

(Registration continued on back)

**Student Information**

Student Full Name: \_\_\_\_\_

Grade to be enrolled in: \_\_\_\_\_ Public School attending: \_\_\_\_\_

Sacraments Completed:

Church Name

Baptism                    Y    N    \_\_\_\_\_

(denomination)

Reconciliation        Y    N    \_\_\_\_\_

Communion            Y    N    \_\_\_\_\_

Confirmation         Y    N    \_\_\_\_\_

Attended Blessed Sacrament PSR before?    Y    N

Last PSR Grade Attended: \_\_\_\_\_

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(denomination)

Reconciliation        Y    N    \_\_\_\_\_

Communion            Y    N    \_\_\_\_\_

Confirmation         Y    N    \_\_\_\_\_

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