St. Francis of Assisi Parish School of Religion 203 E. Main St. Teutopolis, IL 62467

PSR Registration Form

School Year 2023-24

Office Use
Date
Amt. Pd
Cash, Ck. Online
Initials

(217)961-6477 Parents' Name(s):					Initials	
Address:			City:			
Phone:	Cell:		Email:			
Student(s) live with (Are you registered m If No, what parish or	nembers of St. Fra	ncis of Assisi I	Parish? Yes	or No		
Child(ren) Names:	Grade 1-12 th	Grade:	Church Bap	tized	School Child Attend	ds
						
Education Program I want my	volunteers. child/children	to receive th	e sacraments w	ith St. Franc	n by the St. Francis Pa is of Assisi Parish . If mal certificate or rec	your child
education programs. communicate the tip	nd Youth Protection We will be using our with the videos. Par	; videos provic children safe. ents are alwa	ded by the dioceso This is required t ys welcome to vice	e during regul raining each y	ent training for childre arly scheduled classes t ear for the children. E with their child. Please	to ach class has a
I would lik	ke to view the vide	eos with my c	hild(ren).			
I give my	permission for my	/ child(ren) to	participate in the	Personal Tra	ning Session.	
					sonal Safety Training S	
(Parent/Guardian Si	gnature)			 (Date)		

^{*}If your grade 1 child was baptized in another parish other than St. Francis, please forward to us a copy of the Baptismal record. If you cannot locate the Baptismal record, please contact the parish of your child's Baptism, and request a copy of the Baptismal record to be forwarded to St. Francis Religious Education Office. We will in turn make a copy for our records and mail the original record back to you. As always, thanks for your cooperation.

Medical Information:

information about the condition.

Child:	Cond	lition:		
Child:	Cond	lition:		
Child:	Cond	lition:		
Emergency Cor	ntact:			
In case of an eme	rgency, who else coul	d we contact if you a	re unavailable?	
Contact:		Phone:		
Contact:		Phone:		
Photo Consent We may take picto	: ures on occasion, if so	we need your permi	ssion.	
I give m purposes.	ny permission for my c	child(ren)'s photo to b	oe taken and used for ministr	ry or publicity
the way you can h	it uses volunteers to be	spaces below.	still in need of help. If you ca	n help please indicate
Grade School Mo	rning Building Superv	rision: 7:15-7:50 a.m		
Monday:	Tuesday:	Wednesday:	Thursday:	Friday:
Grade 1-6 Teachii	ng or Walking Studen	ts: 7:50-8:45 a.m.		
Teach:	Mass/Video Wal	ker:	Gospel: Sub: _	
Monday:	Tuesday:	Wednesday:	Thursday:	Friday:
Grade 7 and 8 He	lp 7:20-8:30 p.m. We	dnesday—Septembe	r to April:	
Teach full year: _	Teach one	e semester:	Hall Monitor:	(Monthly)
High School Help	7:20-8:30 p.m. Wedn	esday—September t	o April:	
Teach full year: _	Teach one	e semester:	Hall Monitor:	(Monthly)

All volunteers need to have taken "Protecting God's Children" class.

If your child has any medical or special health issues we should know about, please list the child's name and