

FAMILY INFORMATION

FAMILY NAME	E: RELIGION:					
Father's name:						
i ather 5 hame.			(As it appears on birth certificate)			
Address:						
		N	lumber/street/city/state/zip			
Phone number	Email address		Age	Date of birth		
Mother's name:						
			(As it appears on birth certific	cate)		
Address:						
		(1)	Number/street/city/state/zip)			
Phone number	Email address A				Day of birth	
Student 1:					·- <u>-</u>	
		(As it appears on	birth certificate)		Does lives w/ both parents?	
Date of birth	Age	Grade	1st. Communion/Confirma	tion/Other	Phone number	
Received						
Sacraments:	tism	Reconciliation	1st. Communion	Confirm	ation	
Certificates copies of:						
	Вар	tism Recond	ciliation 1st. Commu	nion	Confirmation	
Student 2:		(As it appears on	hirth cortificato)		Does lives w/ both parents?	
		(As it appears on	birtir certificate)		Does lives w/ both parents?	
Date of birth	Age	Grade	1st. Communion/Confirmation	on/Other	Phone number	
Received						
Sacraments:	tism	Reconciliation	1st Communion	Confir	mation	
Certificates copies of:	Bapt	tism Reconci	liation 1st. Commu	nion .	Confirmation	

CHRIST THE KING PARISH

REQUIREMENTS FOR REGISTRATION PSR (Parish School Religion)

Copy of your child's Baptismal record (if Catholic)

Copy of your child's Birth Certificate

Family registration. Enrollment agreement.

Registration fee.

REGIS	STRATION FEE: (NON	REFUNDABLE)				
Regis	tration fee \$25.00/Fam	ily				
Book	cost	Children enrolled:	Total: \$			
The p		ash, credit/ debit card or ma	ke check payable to Christ the King Catholic			
Financia	l concerns should not prevent	your child/children from participating,	please contact the parish office for financial assistance.			
ASIF	REGISTER MY CHILD/	CHILDRE FOR PSR, I HEF	EBY UNDERSTAND AND AGREE:			
			e policies of the parish found in the PSR handbook.			
•	Attend parent meetings. I will make sure that my Make sure my child/child My child/children will tal	tend weekly mass with my child/children. tend parent meetings. vill make sure that my child/children assist on time to every single class an exception of justified absence. ake sure my child/children receive the Reconciliation Sacrament. y child/children will take part in the end of course retreat. I must withdraw my child/children before the PSR year ends, I will notify the parish office.				
	Parent/Guardian's	signature	Date			