

**St. Catherine of Siena  
Parish School of Religion Registration Form Grades 5 – 7<sup>th</sup>  
2020-2021**

**Student Information:**

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Student's Last Name	First Name	Date of Birth	
Age	Gender		

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Home Address	Zip	City
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School Child Attends	Grade (2020-2021 School Year)
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Previous Religious Instruction: \_\_\_\_\_ From Grade \_\_\_\_\_ To Grade \_\_\_\_\_

Sacraments Celebrated: [ ] Baptism [ ] Reconciliation [ ] First Eucharist

**Health & Well Being  
Information:**

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Are you a registered parishioner of St. Catherine of Siena? [ ] Yes [ ] No If no, where \_\_\_\_\_

**PARENT INFORMATION \*\*Please print carefully**

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Father's Name	Religion
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Mother's Name	Religion
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Primary Cell Phone Number  
Primary Email Address

Child/Children lives with (circle one)    BOTH PARENTS    MOTHER    FATHER    OTHER\_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

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Emergency Contact Name	Emergency Contact Phone Number(s)
Relation to Child	

**Registration Fees:**

**\*Please make sure the following is attached:**

- **Registration Fee (all students)**
  - **Permission Letter from Pastor (For families not registered at St. Catherine of Siena)**
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Photo Release: During the school year we may take photos of our PSR students participating in activities. The pictures may be submitted to the Clarion Herald or published in our parish bulletin. Please initial below to give your permission to include your child/children in these submissions for the summer session.

\_\_\_\_\_ I agree to the above photo release.  
Initial