



PSR Registration Form 2021-2022

Grades K-12th

Anna McCloy, DRE

For office use only:
Amount Paid: \$ _____
Check #: _____
Date Posted: _____

Please Note: You MUST be a registered family at Christ the Redeemer to participate in our PSR program. If this is not the case, please fill out a Parish Registration Form. This can be found on our website (www.ctrcc.net), or in the church office or the Narthex.

Family Env. #: _____
Family Last Name: _____ Primary Phone: _____ Primary Email Address: _____
Legal Guardian 1: _____ Religion: _____ Relationship to child: _____
Legal Guardian 2: _____ Religion: _____ Relationship to child: _____
Emergency Contact Person: _____ Phone Number: _____ Relationship to child: _____

Please select one:

There **are NO** changes in our family contact information There **ARE** changes in our family contact information (please indicate any changes below)

-Home Phone Number: _____ - Cell Phone Number: _____ (for) _____
-Address: _____ -Other: _____

Student 1 Name: _____ M/F: _____ DOB: _____ Grade (as of Sept 2021): _____

Sacraments Received: (Check all that apply)

<input type="checkbox"/> Baptism	Parish Name: _____	Date: _____
<input type="checkbox"/> First Communion	Parish Name: _____	Date: _____
<input type="checkbox"/> Reconciliation	Parish Name: _____	Date: _____
<input type="checkbox"/> Confirmation	Parish Name: _____	Date: _____

Please note any special needs here (allergies, asthma, etc.): _____

You may contact DRE at religioused@ctrcc.net with any confidential needs.

REGISTRATION FORM CONTINUES ON BACK

Student 2 Name: _____ M/F: _____ DOB: _____ Grade (as of Sept 2021): _____

Sacraments Received: (Check all that apply)

<input type="checkbox"/> Baptism	Parish Name: _____	Date: _____
<input type="checkbox"/> First Communion	Parish Name: _____	Date: _____
<input type="checkbox"/> Reconciliation	Parish Name: _____	Date: _____
<input type="checkbox"/> Confirmation	Parish Name: _____	Date: _____

Please note any special needs here (allergies, asthma, etc.): _____

You may contact DRE at religioused@ctrcc.net with any confidential needs.

Student 3 Name: _____ M/F: _____ DOB: _____ Grade (as of Sept 2021): _____

Sacraments Received: (Check all that apply)

<input type="checkbox"/> Baptism	Parish Name: _____	Date: _____
<input type="checkbox"/> First Communion	Parish Name: _____	Date: _____
<input type="checkbox"/> Reconciliation	Parish Name: _____	Date: _____
<input type="checkbox"/> Confirmation	Parish Name: _____	Date: _____

Please note any special needs here (allergies, asthma, etc.): _____

You may contact DRE at religioused@ctrcc.net with any confidential needs.

For more children, you may attach additional pages as needed

- Do you give us permission to take pictures of your child for church use only? Yes/No _____
- Would you be willing to teach or assist in the PSR program? Yes/No _____
- If your child WAS NOT baptized at Christ the Redeemer and you have not submitted a copy of the Baptismal Certificate, please turn it in before the first day of class.
- Please make sure you have provided a valid and current email address. This is the primary way our program will communicate with you regarding announcements, class cancellations or reminders.

Parent Signature: _____ Date: _____

Tuition for the 2021-2022 school year is as follows: \$45 for the first student, \$20 for each additional student, with a \$100 family cap.
 Scholarships are available if needed.

Please contact our pastor, Fr. Higgins (frhiggins@ctrcc.net) or our DRE, Anna McCloy, (religioused@ctrcc.net)