Parish Schoo	l of Religion (PS	R)Registra	ation Form
School Year 2020_			
New Student			
Returning Studen	t		
Parent(s) Primary E-MA	IL		
	(Please Print (Clearly)	
Main Phone # ()_			
Preferred Method of co	ntact: text	email	*Must indicate ONE
STUDENT'S NAME			
Grade Level	_ (First)	(Middle)	(Last)
Birth Date:	(Month/Day/Year)	Baptisma	date:
Baptismal Church		_City/State	·
School Currently Enrolled			
Are there any special needs we s	hould be aware of?		
Last PSR CLASS ATTE	NDED:	v	/here
Please list additional Cl	nild (children) oi	n back of fo	orm
***Student(s) Lives with	nBoth Pai	rents	FatherMother
Legal Guardian			

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STUDENT'S NAME		···· ·································		
Grade Level	(First)	(Middle)	(Last)	
Birth Date:	(Month/Day/Year) Baptismal date:			
Baptismal Church		City/State		
School Currently Enrolled				
Are there any special needs we sho	uld be aware	of?		
Last PSR CLASS ATTEN	DED:	Where	9	
STUDENT'S NAME		(Middle)	(Last)	
Birth Date:	(Month/Day	/Year) Baptismal date):	
Baptismal Church		City/State		
School Currently Enrolled				
Are there any special needs we sho	uld be aware	of?		
Last PSR CLASS ATTEN	DED:	Where)	
Parent/Guardian:				
Address		City	ST_	
Religion				
Parent/Guardian:				
Address			ST_	
Religion			e	

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Emergency Contact, to be used only if parents/guardian cannot be reached:

_relationship____

Phone	()	
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I/We understand the OLQP's Religious Education Classes meet every Wednesday night from 6:15-8:00 p.m. Sept-May, unless stated in the PSR schedule. Included in that time is Mass from 6:30-7:00 p.m. Mass attendance is very important to the PSR program.

I/ We understand that <u>the school doors are locked at 6:25 and are not</u> <u>reopened until 7:00 p.m. If student arrives late, then I/We are to take</u> <u>the student directly to the church.</u> I/We will inform teacher/coordinator of any persons who will be responsible for student's transportation, other than ourselves.

Date:_____Signature:_____

Fees: \$35 for one child, \$50 for families with more than one child.

*Payment is due at time of registration, unless other arrangement is made.

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Office Use On	Y : Date	Cash	_ Check #	
Check if received:	Registration Form	Permission & Intere	est Form	
Initials				

Permission and Interest Form

Students First and Last Names and Grades

Handbook

We/I have read and agree to the Our Lady Queen of Peace School of Religion Handbook guidelines. Available to read/download on the church website. <u>www.olqpbethalto.org</u>

Parent(s)/Guardian	Signature	Date
	- g	

Photo Release

At Our Lady Queen of Peace School of Religion (PSR). There may be opportunities for photographs to be taken of our student engaged in activities while attending classes. Photos may indicate grade level but not individual names. Photos my appear in various publications, such as church bulletin, PSR newsletters, the Catholic Times or other local newspapers.

I give permission to OLQP PSR program to use my child's (children's) photo as stated above.

____YES ____NO

Parent(s)/Guardian Signature_

Date

Safe Environment/Personal Safety Training

As you may know, all adults of our diocese who interact with minor children in our parishes and schools are required to attend a Protecting God's Children Training. Also included in developing a safe environment for our children is training of students enrolled in our PSR program. The PSR program training sessions are based on publications that focus on personal safety. Each grade level are presentations that are facilitated by the catechists. The Safe Environment program is presented during regular class times as planned by the catechist for each grade level. If you chose not to have your child participate, an alternate activity will be given in a different classroom during the training session. (Continued on back)

You may also view Virtus' Protecting God's Children, A Guide for Parents, Guardians, and Other Caring Adults in the school office or request a copy below.

____I Do give permission ____IDO NOT give permission

For my child(ren) to participate in the Safe Environment/Personal Safety training at Our Lady Queen of Peach Parish School of Religion (PSR)

Parent(s)/Guardian	Signature	Date	9
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_____Yes, I would like a copy of Virtus' Protecting God's Children, A Guide for Parents, Guardians, and Other Caring Adults.

Substitute Teachers

I am interested in being a substitute PSR teacher. I HAVE or HAVE NOT

Attended Protecting God's Children Training. This is required in order to do any activities with children in our parish.

First & Last Name:_____