

Saint Bernadette Catholic Church

Parish School of Religion (September 13, 2009 - May 18, 2010)
350 NW California Blvd. Port St. Lucie, Florida 34986

Date Paid _____

RECEIPT # _____

Fees for year 2009-2010

Amt. Paid \$ _____ Confirmation Preparation is \$85.00/all students in prep. class

Check # _____ First Communion Preparation is \$85.00/all students in prep. class

All others Registration \$60.00 first child / \$25.00 others in the same family

Early registration save \$10.00 per family / Deadline August 10, 2009

Parish School of Religion includes Grades Preschoolers through High School (Religious Education) and the Sacramental Preparation Program for all the students either in the PSR or registered in our Parish and attending Catholic Schools)

Student

_____ / _____

Last Name First Name Middle Name Date of Birth

Father

First Name Last Name Occupation Phone (wk) and area code

Mother

First Name (Maiden Name) Last Name Occupation Phone (wk) and area code

_____ / _____

Family Address Street City Zip Code Home Phone including area code Emergency Phone inc. area code

Who is your emergency contact person? _____ Their Relationship _____

Grade last attended Religious Education _____ Grade in School _____

Sacraments:

BAPTISM Date _____

Church _____

Address _____

City State Zip Code

FIRST HOLY COMMUNION Date _____

Church _____

Special Health needs (if any) _____

I certify that the information is correct and will be updated as needed.

Parent(s) / Guardian Signature _____ Date _____

I will provide a copy of my child's Baptism Certificate. This is part of the registration. I will provide a witnessed medical release form to the Director of Religious Education, which will enable my child to receive medical treatment in the event of an accident while participating in this program. See back of this form! This is also part of the registration and must be attained for complete registration of your child or children.