

St. Francis of Assisi Catholic Church
Parish School of Religion

Registration Form

Child's Name _____ Grade _____
Child's Name _____ Grade _____
Child's Name _____ Grade _____
Child's Name _____ Grade _____
Child's Name _____ Grade _____

Parents' Names _____
Address _____
Home Telephone _____
Mother's Cell Phone _____
Father's Cell Phone _____
Mother's E-Mail _____
Father's E-Mail _____
Information you think we should know (preferred communication mode, allergies, handicaps, etc.)

PLEASE VOLUNTEER

Please mark any of the areas where you would like to volunteer to assist in the PSR program.

- I would like to teach
- I would like to assist a teacher in the classroom
- I can help supervise the students before class begins (Mon, Wed, & Fri, 7:15-7:30)
- I can help monitor the students during Mass (Tues & Thurs, 7:15-8:10)
- I can help transport musical instruments from church to school (Tues & Thurs)
- I can help as a crossing guard from church to school (Tues & Thurs)
- I can help walk the children from church to school (Tues & Thurs)

Office Use Only:

Amt Paid _____ Date _____