

**St Elizabeth, St James, St Jerome  
2016-2017 PSR and Home Study  
Registration Form**

Parent's Name(s)\_\_\_\_\_Email\_\_\_\_\_

Address\_\_\_\_\_Daytime Phone\_\_\_\_\_

City/Zip\_\_\_\_\_Evening Phone\_\_\_\_\_

Are you registered at one of our parishes? \_\_\_Yes \_\_\_No \_\_\_St Jerome \_\_\_St James \_\_\_St Elizabeth

Child's Name\_\_\_\_\_Grade\_\_\_\_School\_\_\_\_\_Birthday\_\_\_\_\_

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\_\_\_**PSR: GRADES K-5** \_\_\_Wednesday 4:15-5:30 OR \_\_\_Wednesday 6:15-7:30

**GRADES 6-8** Middle School Faith Sharing \_\_\_6:15-7:30 (Marian & Bob Crosby)

\_\_\_ *I am interested in volunteering as a PSR Catechist or Session Secretary*

\_\_\_**Home Study K-12** Family Centered Format (Alternative to PSR/Parochial School)

**Number of Children** \_\_\_ **X \$40.00 = Total Fees**\_\_\_\_\_

*If you are unable to pay these fees, please contact the parish office.  
We do not want the fees to stand in the way of our children's religious education.*

**Please return registration forms and payment to the parish office.**

\_\_\_ I give permission to St Jerome Church to responsibly include my child(ren) in a photo for the parish bulletin, website and/or Catholic Times (diocesan newspaper).

Parent Signature\_\_\_\_\_Date\_\_\_\_\_

Check # \_\_\_\_\_ Amount paid \_\_\_\_\_ Date \_\_\_\_\_