

**Church of St. Helen
Parish School of Religion
Registration Form Grades 1-8**

2020-2021

FAMILY LAST NAME _____

EMAIL ADDRESS _____

CELL # (for receiving Text REMIND messages) _____

My Child/Children will be attending **IN CLASS PSR/EDGE** _____ **AT HOME PSR/EDGE** _____

Student Information

1. _____

Child's Last Name	First Name	School	Grade
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2. _____

Child's Last Name	First Name	School	Grade
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3. _____

Child's Last Name	First Name	School	Grade
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4. _____

Child's Last Name	First Name	School	Grade
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Family Information

Are you a registered member of St. Helen Parish? _____ yes _____ no

If NO, please indicate the name of your parish: _____

Family Last Name	Father (First Name)	Mother (First & <u>Maiden name</u>)
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_____ () _____

Mailing Address	City	Zip	Home Phone Number
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Cell Number () _____

COMPLETION OF THIS FORM IS REQUIRED TO REGISTER YOUR CHILD FOR PSR/EDGE
Please make checks payable to Church of St Helen or pay at our website (www.sthelen.com) through
ONLINE GIVING Registration is due by Sept. 20th.

of children _____ X \$50 = _____
(4th child is free)

First Communion fee (Gr 2 only) = \$40
Confirmation fee (Gr 8 only) = \$40

*** PLEASE NOTE THAT PSR/EDGE FEE IS \$50
IF YOU HAVE A CHILD MAKING FIRST
COMMUNION and/or CONFIRMATION ADD
ANOTHER \$40 PER SACRAMENT TO YOUR
TOTAL.**

Total = _____ **CASH** _____ **Check #** _____ **On-Line Payment** _____