

Saint Bernadette Parish
2025-26 PARISH SCHOOL OF RELIGION

Registration Form

1st — 8th Grades

Monday Evenings 6:00pm — 7:30pm

*The PSR Registration fee is **\$100 per child**.
Late registrations will be assessed a \$25 late fee per child.*

Please Print

Family Last Name: _____

Address: _____

City: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Parent E-Mail: _____@_____

Saint Bernadette PSR will use email as the regular means for correspondence with parents.

CHILD REGISTRATION

If you are registering your child for the first time and your child was NOT baptized at St. Bernadette Parish, please submit a co of our child's baptismal certificate with this registration form.

Child's Name	Birth Date	PSR Grade Entering (1-8)	Was child in a catechetical program last year?	Has child received Catholic Baptism?	Has child received First Communion?	Has child received Confirmation or Chrismation?
			<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N
			<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N
			<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N
			<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N
			<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N

If child was enrolled in a catechetical program last year, which program:

☐ St. Bernadette PSR ☐ St. Bernadette School

☐ Catholic Homeschool Program: _____
Program Name

☐ Program at Other Catholic Parish: _____
Parish Name City, State

I AM REGISTERING MY CHILD (CHILDREN) FOR:

Please check your selection

☐ **In-Person PSR** on Monday evenings, 6:00-7:30 p.m.

Home-Based PSR is not being offered. Please speak with Mrs. Hajduk.

PARENT/GUARDIAN INFORMATION

Child lives with: ☐ Father and Mother ☐ Mother only ☐ Father only ☐ Other _____

Father's/Guardian's Name: _____
First Middle Last

Is the father/guardian Roman Catholic: ☐ Yes ☐ No

If no, this person's religion/denomination: _____

Father's Marital Status: ☐ Married ☐ Separated/Divorced ☐ Single ☐ Widowed

Mother's/Guardian's Name: _____
First Middle Maiden Last

Is the mother/guardian Roman Catholic: ☐ Yes ☐ No

If no, this person's religion/denomination: _____

Mother's Marital Status: ☐ Married ☐ Separated/Divorced ☐ Single ☐ Widowed

Are you a registered member of St. Bernadette Parish? ☐ Yes ☐ No If not,
what is your home parish:

Parish Name

City, State

ACKNOWLEDGEMENT

Children preparing for Sacraments of Initiation (First Communion or Confirmation) should be registered in PSR or Saint Bernadette School or be verifiably homeschooled. **Sacramental preparation requires a separate form and fee.**

I acknowledge that **I have the responsibility to provide a Catholic family environment for my child, including weekly participation at liturgy on Sundays and Holy Days of obligation. It is my responsibility to ensure that my child is present and prompt for Parish School of Religion sessions, and for me to be present at parent meetings.** I understand that the contents of the Catechism of the Catholic Church as well as the magisterial documents of the Roman Catholic Church provide the doctrinal and moral content for all teaching in the Parish School of Religion.

Further, I understand that the **Saint Bernadette PSR Handbook is available on-line at the parish website.** I have read and understand all the policies and guidelines contained in the handbook. I agree that my child and I will abide by these policies and guidelines for the current academic year.

Emergency medical authorization and special health concerns are completed on a separate form.

Finally, I understand that I may discuss any problems or concerns with the Catechetical Director or the Parish Pastor.

Parent/Guardian Signature:_____ Date:_____

I am interested in volunteering as a:

☐ PSR Teacher/Catechist

☐ Helper for my child's PSR Teacher/Catechist

☐ Helper in the PSR Office on Monday evenings

PSR REGISTRATION FEES

\$100 per child (**\$25** per child late fee after September 15, 2025)

Total Fees: \$_____.00

MAKE CHECKS PAYABLE To: **SAINT BERNADETTE PARISH**

Date Received

Amount Paid

Check Number

____/____/____

\$ _____ ☐ CASH

GRADE 2 FIRST COMMUNION AND GRADE 8 CONFIRMATION REQUIRE AN ADDITIONAL REGISTRATION FORM AND FEE. REGISTRATION IN THE PSR PROGRAM DOES NOT REGISTER A CHILD FOR SACRAMENTAL PREPARATION.

