



Saint Elizabeth Ann Seton Catholic Church
Parish School of Religion Registration for 2026-2027

PreK – Confirmation Prep

**Please fill out one form per child.*

1. Student Information			
First Name:		Middle Name:	Last Name:
Gender: ☐ Male ☐ Female	Date of Birth:	Nickname <i>if applicable</i> :	Grade as of Fall 2026:
Grade of last PSR class attended:		School Attending:	Are you a registered parishioner? ☐ Yes ☐ No ☐ We are interested in registering.
List any allergies, medical conditions, educational or behavioral needs.			

2. Sacrament Information			
Baptism: ☐ Have received ☐ Have NOT received	First Reconciliation: ☐ Have received ☐ Have NOT received	First Communion: ☐ Have received ☐ Have NOT received	
<i>Your child's Baptismal Certificate must be included when registering for First Communion & Confirmation</i> ☐ My child was baptized at St. Elizabeth Ann Seton, Springfield, Missouri (<i>*no need for a copy</i>) OR ☐ My child was baptized at _____ (church) _____ city/state (include copy*) ☐ My child needs First Reconciliation/Communion or Confirmation. <u>Select one:</u> ☐ *I am including a copy of my child's Baptismal Certificate <u>OR</u> ☐ will turn in by September 27, 2026.			

3. Family Information			
Father/Guardian's Full Name:		Father/Guardian's Cell:	
Mother/Guardian's Full Name:		Mother/Guardian's Cell:	
Family Email (one that you check regularly) PRINT CLEARLY:		Other Email PRINT CLEARLY:	
Home Address:		City:	ZIP:
With whom does child live? ☐ Both Parents ☐ Father ☐ Mother ☐ Other _____		Primary Parent Contact (Mother, Father, Grandparent):	
Primary Contact Phone:	Emergency Contact (other than parent/guardians):	Emergency Contact Relationship to Child:	Emergency Contact Phone #:
Who is responsible for religious education in your home: _____ Both Parents _____ Father _____ Mother _____ Guardian/Other			

***Please complete and sign the back side of this registration form
& attached Diocesan Media Release.***

****Fees increase after August 31 deadline. See backside.***

4. Weekly PSR Dismissal & Schedule (Grades 4-Confirmation are dismissed directly from class unless otherwise requested)

Dismissal: All children in grades PreK–3rd grade require pick up by a parent or designee.

I, _____, as the parent or guardian for
(Parent's Name)
_____, designate the following other than myself:
(Child's Name)

Designee 1: _____ Relationship: _____

Designee 2: _____ Relationship: _____

Parent/Guardian Signature: _____

Date: _____

PSR Sunday 10:10-11:10am Class Schedule: Please select your child's class:

___ **Junior PSR for 4 year olds** (age 4 by Aug. 1)

___ **Sunday Confirmation 2** 10:10-11:10 am **OR**

___ **Wednesday Confirmation 2** 6:30-7:30 pm

___ **PSR for Grades K-6 and Confirmation 1**

___ **Monthly Family Faith Formation** (1 form per child)

5. Flocknote Notifications

Flocknote is our primary resource for communicating with everyone in the parish.

___ We are already registered for Flocknote at SEAS.

___ We have not registered for Flocknote but prefer to register our family: **www.seas2200.flocknote.com**

___ Please register our family with Flocknote using this information:

Parent's Name: _____ Email _____

Mobile phone: _____

6. Parent Volunteer Pledge

Parent support and involvement is key to your child's success in life and especially within our Faith Community. We ask that you take an interest in what your child is learning at PSR by engaging them in discussion and looking over the weekly materials they bring home. (Ask for them to show you the materials!) Further support of our parish is also encouraged through volunteering and/or growing in your personal faith. Please check below if you will help and/or are interested in any of the following:

Religious Education PreK through Confirmation

___ **Catechist** ___ Sunday ___ Monthly FFF

___ **Assistant Catechist** ___ Sunday ___ Monthly

___ **Sacramental Prep for older children**

___ **Substitute Catechist for Sundays** ___

___ **PSR Hall Security for Sundays**

___ **Children's Liturgy of the Word**

Kindergarten & 1st grade kids are dismissed during Mass; training and materials provided.

___ **Assist with Saints' Fest** Family event planned for Sunday 11/1/26

___ **Assist with Jesse Tree Family Event** Planned for Sunday 12/6/26.

___ **Confirmation Two Small Group Leader**
___ Sunday ___ Wednesday

___ **Help with Confirmation One Retreat** 11/15/26

___ **Help with Confirmation Two Retreat** 11/8/26

___ **Help with Confirmation Luncheon** 3/14/27

___ **Scripture Study**

Adult faith formation during your child's/children's PSR class time.
___ Sunday

___ **Learn about Theology of the Body**

Taught to all children in Kindergarten through 8th grade.

Parent/Guardian Signature: _____

Date: _____

Registration Fees:

PreK-Confirmation One: \$35 per student on or before August 31, 2026,* \$45 on or after September 1, 2026**

Confirmation Two: \$65* (This includes materials, all-day retreat with meal, and the Confirmation luncheon.) (*Max \$100 per family who register by deadline; **\$110 after deadline)

Monthly Family Faith Formation: \$100 per family (materials & 5 meals)

*Checks payable to SEAS Church

If you are unable to pay any of the fees, check here ___ If you are able to pay part, enter amount \$ _____

Date Paid _____ Online _____ Check # _____ OR _____ Cash Amount paid \$ _____



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DIOCESE of SPRINGFIELD-CAPE GIRARDEAU

Office of Child and Youth Protection

Parent/Guardian Media Consent and Release Form

Dear Parent/Guardian,

By completing and signing this Parental Media Consent and Disclaimer Form, it is understood that, as part of catechesis and education in parishes and schools, my child/student may participate in live and/or recorded electronic communications and activities, such as group email, group text messages, social media and/or audio or video conferencing (using only the specific platforms designated below).

These activities and images may be recorded and included on the official website of the Diocese, Parish or School or in social media publications, materials and campaigns, as well as in other media initiatives (e.g. print or electronic news media, newsletters, websites, fundraising, advocacy and development efforts, grant applications, and video, PowerPoint, or other electronic or communication media presentations), only in compliance with *the Policy and Guidelines for the Use of Technology, Email, and Social Media* and other related policies, without compensation to the child or parent/guardian.

Photographs, video conferences and recordings, social media messages, and other print and electronic media may be available for an indeterminate period of time, unless otherwise noted: _____

and restricted to specific groups of people: _____

and, for a specific purpose: _____

- ✚ Parents/guardians who have completed and meet the Safe Environment, Training, and Background Research requirements, and have submitted the current Adult Code of Conduct to the Parish/School Safe Environment Coordinator may request to participate in videoconferencing/audio conferencing sessions involving their child. Parents/guardians may, at any time, request copies of materials sent to their child in connection with electronic communications.
- ✚ I understand that, due to the nature of electronic communication platforms and the media, confidentiality and/or protection against unauthorized dissemination cannot be guaranteed.
- ✚ I understand that any photograph, audio or video recording will be used only by the Diocese, Parish or School in a legal manner and that at no time will my child be represented in an unethical manner.
- ✚ I certify that I am aware of, understand and agree to comply with the *Policy and Guidelines for the Use of Technology, Email and Social Media*: <https://dioscg.org/wp-content/uploads/Policy-and-Guidelines-for-the-Use-of-Tech-Email-Soc.-Media.2021.pdf>
- ✚ I understand that unauthorized (one-to-one) personal conversations between diocesan staff and minors are a violation of the *Policy and Guidelines for the Use of Technology, Email and Social Media*, and that I may report any concerns or violations to the Diocesan Office of Communications, Media and Publications, the Diocesan Office for the Protection of Children and Youth, Law Enforcement, or the Missouri Child Abuse and Neglect Hotline **800-392-3738** or **844-CAN-TELL**.
- ✚ This Consent and Discharge Form is effective for the current academic year, beginning July 1 and ending June 30 of the following year, and may be revoked by the parent/guardian at any time upon written notice.

Child/Student Name: _____ Date of Birth: _____

Parish/School/Group and Place: _____

Permission is granted for these contact preferences (initial and full):

____ Group Emails for Parent/Guardian: _____ Child: _____

____ Group Text Messages for Parent/Guardian: _____ Child: _____

____ Video or audio conferencing platform: _____

____ Designated social media platform: ____ Facebook ____ Twitter ____ Instagram ____ YouTube

____ **NO, I do not consent to my child being contacted by any means of electronic communication.**

Parent/Guardian Name (print): _____ Phone number: _____

Parent or Guardian Signature: _____ Date: _____