

PSR TEEN FAITH PROGRAM CONFIRMATION CATECHIST/
LEADER CHILDRENS
LITURGY AIDE/
VOLUNTEER SMS
STUDENT HOME
SCHOOLED

GENERAL INFORMATION:

First Name: M
 F
Last Name:
Street Address:
 Mailing State:
Mailing City: Mailing Zip:
Home Phone: Other Phone:
Family's Email Address:

FAMILY INFORMATION:

Is the family formally registered at St. Mary's Parish Yes No

**Father's First Name:
Father's Religion:
**Mother's First Name:
**Mother's Maiden Name:
Mother's Religion:
Child lives with:

** Please provide full baptismal names to verify/complete Parish Registry information.

STUDENT INFORMATION:

Date of Birth: City of Birth State of Birth:
School Attending in Fall: Grade Entering:
Student's Email Address: Student's Cell Phone
Student Supported with IEP or 504 Plan: YES NO Last Religious Ed. Grade Attended: Where:

LEADER INFORMATION:

Registration Date:
Position Requested:
Employment Papers Filed:
Diocese Policy Signed:
Virtus Trained:
Background Filed:
Code of Conduct Signed:

SACRAMENTAL INFORMATION:

Baptism Date:
Baptism Church:
Church Address:
City: State: Zip:
First Communion Date:
First Communion Church:
Church Address:
City: State: Zip:

OFFICE USE ONLY:

Date Rec'd: Amount Paid: Check Date: Check No/Cash: Initials: