## St. Mary's Religious Education Office P.O. Box 470 Taylorville IL 62568

## **PSR REGISTRATION FORM**

	Fa	amily Name:	
Name of Child	Grade	Place of Baptism	Date of Baptism
amily Address (Include			
Name of Father	Religion of Father	Name of Mother	Religion of Mother
Family's Home Phone n		ency Information	
Family's Home Phone n			
Family's Email Address	4.		
Phone number to reach	n father		
Phone number to reach	n mother		
If Parent's can't be read	ched, please call		
	vho should we call?		
If a doctor is needed, w			