



# Saint Ambrose PSR Registration 2018 -2019

## NEW Students GRADES 1 - 8 and RCIA, adapted for Children

Family Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Contact \_\_\_\_\_ Mother, Father, Grandparent, Other \_\_\_\_\_ Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Religion \_\_\_\_\_ **YES NO YES NO**  
 Baptized Confirmed

Mother's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Religion \_\_\_\_\_ **YES NO YES NO**  
 Baptized Confirmed

Which Parish do you belong to \_\_\_\_\_ School child(ren) attends \_\_\_\_\_

**Registration not complete until Emergency Medical/Photo Release Authorization Form is completed**  
**PLEASE ATTACH A COPY OF THE STUDENT'S BAPTISMAL CERTIFICATE**  
 If baptized at St. Ambrose, please provide date \_\_\_\_\_

### Student's Previous Religious Education

Saint Ambrose School Grades \_\_\_ thru \_\_\_ Saint Ambrose PSR Grades \_\_\_ thru \_\_\_  
 Other Catholic Grade School Grades \_\_\_ thru \_\_\_ Other Catholic PSR Grades \_\_\_ thru \_\_\_

**Sacramental needs of student (circle those needed):** **Baptism** **First Eucharist** **Confirmation**

If this is the FIRST time registering for Saint Ambrose PSR, please call Janet Majka at #330-460-7321

### Religious Education Classes:

- Saturday 9:00 to 10:30am
- Monday 6:30 to 8:00pm
- Wednesday 4:30 to 6:00pm
- RCIA, adapted for children **Grade 3-8**
- FAMILY HOME SCHOOL **Grade 1-8**

Child's Name (Include last name if different from family name)	Grade 2018-2019	Gender M or F	Session Day (Circle One)			
1) _____	_____	_____	FHS	Wed.	Sat.	Mon.
2) _____	_____	_____	FHS	Wed.	Sat.	Mon.
3) _____	_____	_____	FHS	Wed.	Sat.	Mon.

### Classroom and Family Home School

**\$75 for FIRST STUDENT** in a family; **\$50 for each additional student**  
**\$10 FAMILY** discount if registered **BEFORE June 15, 2018**

### Tuition

\_\_\_\_\_

### Financial Assistance Fund - optional:

\$5 donation towards scholarships for those in need

\_\_\_\_\_

### **REGISTRATION FEE ENCLOSED:**

**Please make checks payable to Saint Ambrose Church**  
 (For financial assistance, please contact the PSR Office at 330-460-7302)

**TOTAL:**

\_\_\_\_\_

Visa/MC Account # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Exp. Date \_\_\_\_\_ / \_\_\_\_\_  
 (Circle One)

OFFICE USE ONLY:	CHECK # _____	CASH / CHARGE	AMOUNT: _____
RECEIVED _____ / _____ / _____	FILED IN PDS: _____ / _____ / _____		

Please return to St. Ambrose Church - PSR OFFICE 929 Pearl Rd. Brunswick, OHIO 44212 330-460-7302

## DUE July 1, 2018