



St. Augustine/St. Joseph Parish Center

*89 N. Lincoln St.
PO Box 93
Minster, OH 45865
PH: 419/628-3434
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Dear Parents,

Attached please find the necessary paperwork for registering your child/children for our Parish School of Religion (PSR) classes. Please pay particular attention to the following areas:

- Health Info: This information alerts us to any allergies, medicines, or chronic illnesses your child/children may have.
- Personal: Please make sure you list your Doctor, Dentist, and Hospital and phone numbers in this section.
- Sacraments: If your child received sacraments from a parish other than St. Augustine, Minster, or St. Joseph, Egypt, please attach a copy of those certificates.
- Emergency Contact: This information is critical! Please list people other than the birth parents (I know the form says birth parent, but we already have your information in the family portion of this form). The people you list are people we can contact in the event we cannot get in touch with you either at home or at work in the event of an emergency.

Thank you!

Jane. M. Boeke
Coordinator Religious Education
St. Augustine/St. Joseph Cluster

St. Augustine Church
Student Registration Form

Student Registration: _____

Parent/ Guardian Info.:	Father/Guardian Information: Name: _____ Relationship: _____ Phones: _____ Marital Status: _____ Email: _____ Religion: _____ Occupation: _____ Location: _____		
	Mother/Guardian Information: Name: _____ Relationship: _____ Phones: _____ Marital Status: _____ Email: _____ Religion: _____ Occupation: _____ Location: _____		
Student Name:	Last Name: _____ First Name: _____ Middle: _____ Nickname: _____ Title: _____ Suffix: _____	Name formats used in mailings: Mailing Name: _____ <i>Ex: Mr. John Smith</i> Informal Salutation: _____ <i>Ex: Jack</i> Formal Salutation: _____ <i>Ex: Mr. Smith</i>	
Health Info:	Allergies _____	Medicine _____	Chronic Illness _____
Classes:	Class: _____	Room: _____	Times: _____
	Days: _____		
	Class: _____	Room: _____	Times: _____
	Days: _____		
Personal:	Relationship: _____ Grade: _____ Language: _____ Ethnicity: _____ Religion: _____ Spec Needs: _____ Feild 13: _____ School: _____ Alt Addr: _____ Location: _____	Type: _____ Gender: _____ Birthdate: _____ Lives With: _____ Dentist: _____ Pref Grade: _____ Hospital: _____ Employment: _____ Doctor: _____	
Phone/Email:	Phone: _____	Type: Home/Office/Cell/Other: _____	Unlisted? _____
	Phone: _____	Type: Home/Office/Cell/Other: _____	Unlisted? _____
	Email: _____	Type: Home/Office/Other: _____	Prefer Email? _____
Remarks:	_____		

St. Augustine Church
Student Registration Form

Student Registration: _____	
Family ID #:	Today's Date: ____/____/____
Family Name:	Head of Household:
	Spouse:
	Last Name: _____ Last Name: _____
	First Name: _____ First Name: _____
	Title: _____ Title: _____
	Suffix: _____
Name formats used in mailings:	
Mailing Name: _____	<i>Ex: Mr. and Mrs. John Smith</i>
Informal Salutation: _____	<i>Ex: Jack and Mary</i>
Formal Salutation: _____	<i>Ex: Mr. and Mrs. Smith</i>
Family Info:	Registered: ____/____/____ Family Status: _____
	Street Address Line 1: _____
	Street Address Line 2: _____
	Street City/State: _____ Street Zip: _____
	Geo. Area Number: _____
	Phone Number _____ Description _____ Unlisted? _____
	_____ Home/Office/Cell/Other Yes/No
	_____ Home/Office/Cell/Other Yes/No
	Email: _____ Send Email when possible? _____
	Parish: _____
Mailing Addr.: (if different than street):	Mailing Address Line 1: _____
	Mailing Address Line 2: _____
	Mailing City/State: _____ Mailing Zip: _____
Alternate Addr.:	Alt. Address Line 1: _____
	Alt. Address Line 2: _____
	Alt. City/State: _____ Alt. Zip: _____
	Alt. Email: _____
	Send to Email instead of mail when possible? _____
	Date range you expect to be at this address: _____
	Send mail to alternate address? _____
Alt. Address Remarks: _____	
Remarks:	_____

St. Augustine Church
Student Registration Form

Student Registration: _____

Sacraments:	<p>Birthplace: _____</p> <p style="text-align: right;">Father: _____</p> <p style="text-align: right;">Mother: _____</p> <p style="text-align: right;">Mother's Maiden Name: _____</p>
	<p>Baptism: Name/Extra Info: _____</p> <p>Date: _____ Status: _____</p> <p>Performed by: _____</p> <p>Church Name: _____</p> <p>Church Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p>
	<p>1st Comm: Name/Extra Info: _____</p> <p>Date: _____ Status: _____</p> <p>Performed by: _____</p> <p>Church Name: _____</p> <p>Church Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p>
	<p>Confirm: Name/Extra Info: _____</p> <p>Date: _____ Status: _____</p> <p>Performed by: _____</p> <p>Church Name: _____</p> <p>Church Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p>
	<p>Penance: Name/Extra Info: _____</p> <p>Date: _____ Status: _____</p> <p>Performed by: _____</p> <p>Church Name: _____</p> <p>Church Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p>
	<p>Marriage:: Name/Extra Info: _____</p> <p>Date: _____ Status: _____</p> <p>Performed by: _____</p> <p>Church Name: _____</p> <p>Church Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p> <p>Sponsor: _____ Phone: _____</p> <p style="padding-left: 100px;">Address: _____</p>
Talents:	<p style="text-align: center;">Status: _____</p> <p style="text-align: center;">From: _____</p> <p style="text-align: center;">To: _____</p>

St. Augustine Church
Student Registration Form

Student Registration: _____

Ministries:	Status:	From:	To:
Emergency Contact/ Birth Parent Information:	Name: _____		
	Relationship: _____	Send Courtesy Copies? ____	
	Address: _____		
	City/State: _____	Zip: _____	
	Prefer Email? _____	Email: _____	
	Marital Status: _____	Notes: _____	
	Religion: _____		
	Phones: _____	Type: Home/Office/Cell/Other: _____	Unlisted? _____
		Type: Home/Office/Cell/Other: _____	Unlisted? _____
	Name: _____		
	Relationship: _____	Send Courtesy Copies? ____	
	Address: _____		
	City/State: _____	Zip: _____	
	Prefer Email? _____	Email: _____	
Marital Status: _____	Notes: _____		
Religion: _____			
Phones: _____	Type: Home/Office/Cell/Other: _____	Unlisted? _____	
	Type: Home/Office/Cell/Other: _____	Unlisted? _____	
Name: _____			
Relationship: _____	Send Courtesy Copies? ____		
Address: _____			
City/State: _____	Zip: _____		
Prefer Email? _____	Email: _____		
Marital Status: _____	Notes: _____		
Religion: _____			
Phones: _____	Type: Home/Office/Cell/Other: _____	Unlisted? _____	
	Type: Home/Office/Cell/Other: _____	Unlisted? _____	
Name: _____			
Relationship: _____	Send Courtesy Copies? ____		
Address: _____			
City/State: _____	Zip: _____		
Prefer Email? _____	Email: _____		
Marital Status: _____	Notes: _____		
Religion: _____			
Phones: _____	Type: Home/Office/Cell/Other: _____	Unlisted? _____	
	Type: Home/Office/Cell/Other: _____	Unlisted? _____	