



**Emergency Contact Information**

If your child is not feeling well, please do not bring them to PSR. If your child becomes ill during PSR, every effort will be made to contact you at your primary and alternate phone numbers. In case we cannot reach you, please provide contact information for two additional individuals we may contact to pick up your child.

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**Photography Release**

I understand that photos may be taken of my child/children during PSR. I hereby give St. Joseph Catholic Church permission to publish photographs taken of my child/children, for use in St. Joseph printed publications, website and social media. I release St. Joseph Catholic Church from any expectation of confidentiality for my child/children, and attest that I am the parent or legal guardian of the child/children on the registration form, and that I have the authority to authorize St. Joseph Catholic Church to use their photographs and names.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ **No, I do not consent to my child being photographed**

**Special Considerations**

Is there any additional information about your child that you would like to share with us? Medication? Allergies? Physical/emotional considerations? Special accommodations? ADHD? ASD?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*If you feel your child would benefit from either small group or one:one catechesis or is a suitable candidate for homeschooling catechesis (not available in grades 2 or 8), please email Linda Zvoncheck, Director of Faith Formation, at [lzvoncheck@sjohio.org](mailto:lzvoncheck@sjohio.org), to discuss your options.*

**Student Handbook Agreement**

In an effort to conserve the resources God has given us, we have put the PSR Student Handbook on the parish website. Log on to [www.sjohio.org/ministry/psr](http://www.sjohio.org/ministry/psr) to read the handbook. Once you have read the handbook, please sign below acknowledging your review.

**I have read the PSR handbook online and agree to comply with the guidelines for PSR.**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

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To provide our children with the best PSR experience possible, we could really use your help. Please consider helping us as a (circle):

Catechist/Teacher

Classroom Helper

Hall Monitor

Your Name \_\_\_\_\_

Best Phone \_\_\_\_\_ Email \_\_\_\_\_