

St. Brigid, St. Edward, or St. Joseph  
2024-2025 Registration for Parish School of Religion  
\*\*Please return to church in the collection plate marked PSR or  
mail to Emily Wellman at P.O. Box 228, Liberty, IL 62347 by **August 28<sup>th</sup> 2024**\*\*

Parent(s) \_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_\_\_ Phone \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact(s) (after parents) \_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_\_\_ Phone \_\_\_\_\_

Parent's religion(s) \_\_\_\_\_ We go to church at \_\_\_\_\_  
If you do not attend Mass, this is your invitation: come home! [www.catholicscomehome.org](http://www.catholicscomehome.org)

My child(ren) will be attending PSR at: St. Brigid      St. Edward      St. Joseph

**PSR fee: \$30/1 child or \$50/family** (These costs help with books and supplies) Moved to give more? Thank you! \*\*No child is turned away due to finances.\*\*

Would you like to help in other ways? We are always in need of Catechists! Please consider volunteering your time as a teacher/helper/substitute!

Please circle what you are interested in:

Teacher                  Substitute                  Classroom Helper                  Donating Items Needed

PHOTO RELEASE:

I hereby grant permission to St. Brigid, St. Edward, & St. Joseph to use photographs and/or video of my child(ren) that are registered on this form for the PSR school year of 2024-2025 on social media, websites, bulletins, and with the diocese.

Parent Signature: \_\_\_\_\_

\_\_\_\_\_ No, Please do not use my child's photo/video.

\*\*\*\*\*please clip this portion for your reference\*\*\*\*\*  
PSR begins.... St. Brigid grades 1-8: September 11th from 6:30-7:45 p.m.  
St. Edward grades K-4: September 11th after school until 4:30 p.m.  
grades 5-8: September 8th from 9:15-10:15 a.m.  
St. Joseph grades K - 8: September 8th from after 9 a.m. Mass - 11:15 a.m.

Parish Offices: 217-645-3444 or 217-434-8442; Emily Wellman, CRE 217-257-3536

Please let Fr. Scott or Emily know if we can help in any way! Also, don't hesitate to contact us with any questions!

	Date	Church	Location
Birth		_____	
Baptism			
Confirmation			
1 <sup>st</sup> Communion			

Child's name: \_\_\_\_\_ Grade & School: \_\_\_\_\_

Health/learning concerns: \_\_\_\_\_

	Date	Church	Location
Birth		_____	
Baptism			
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1 <sup>st</sup> Communion			

Child's name: \_\_\_\_\_ Grade & School: \_\_\_\_\_

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	Date	Church	Location
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1 <sup>st</sup> Communion			

Child's name: \_\_\_\_\_ Grade & School: \_\_\_\_\_

Health/learning concerns: \_\_\_\_\_