



Sibling-Gr \_\_\_\_\_

**For Office use only:**

Appt \_\_\_\_\_

Registration Pd \_\_\_\_\_

Packet \_\_\_\_\_

Baptismal Certificate \_\_\_\_\_

Birth Certificate \_\_\_\_\_

**REGISTRATION**

**Date of Registration** \_\_\_\_\_

**Grade Entering** \_\_\_\_\_

**School Year** \_\_\_\_\_

**Name** \_\_\_\_\_  
(Last) (First) (Middle)

**Address** \_\_\_\_\_  
(Street) (City) (State) (Zip)

**Email address:** \_\_\_\_\_

**Telephone#** \_\_\_\_\_ **Sex: M F**

**Date of Birth** \_\_\_\_\_ **Place of Birth** \_\_\_\_\_

**Date of Baptism** \_\_\_\_\_ **Church** \_\_\_\_\_ **City** \_\_\_\_\_

**Date of First Holy Communion** \_\_\_\_\_ **Church** \_\_\_\_\_ **City** \_\_\_\_\_

**Father's Name** \_\_\_\_\_ **Occupation** \_\_\_\_\_

**Birthplace** \_\_\_\_\_ **Cell#** \_\_\_\_\_ **Work#** \_\_\_\_\_

**Mother's Name** \_\_\_\_\_ **Occupation** \_\_\_\_\_  
(First) (Maiden)

**Bithplace** \_\_\_\_\_ **Cell#** \_\_\_\_\_ **Work#** \_\_\_\_\_

**Guardian of Child: Both Parents** \_\_\_\_\_ **Father** \_\_\_\_\_ **Mother** \_\_\_\_\_ **Other** \_\_\_\_\_

**Religion of Father** \_\_\_\_\_ **Mother** \_\_\_\_\_

**Transferred from** \_\_\_\_\_ **City** \_\_\_\_\_ **Grade** \_\_\_\_\_  
(School)

**In order to complete the application process we need a copy of your child's Birth Certificiate as well as a Baptismal Certificate (if your child is Catholic)**