

# NEW STUDENT REGISTRATION INFORMATION

Name \_\_\_\_\_ Gender \_\_\_\_\_ Age at Last Birthday \_\_\_\_\_  
Last First Middle Name

Current Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Child Resides With \_\_\_\_\_ Language Spoken At Home \_\_\_\_\_  
Birthplace \_\_\_\_\_ Birth date \_\_\_\_\_  
Month Day Year

Date	Church	City	State
Baptism (please send a copy) _____			
First Communion _____			
Confirmation _____			

Did Student Attend Pre-School or Nursery School Yes \_\_\_ No \_\_\_ Name of School \_\_\_\_\_  
Date Student Will Enter School \_\_\_\_\_ Grade \_\_\_\_\_

Transfer Student School Last Attended \_\_\_\_\_

In What Parish Is Your Family Registered \_\_\_\_\_

Father \_\_\_\_\_ Religion \_\_\_\_\_ Occupation \_\_\_\_\_

Employed By \_\_\_\_\_ Address/Telephone \_\_\_\_\_

Email address \_\_\_\_\_

Mother (Maiden Name) \_\_\_\_\_ Religion \_\_\_\_\_ Occupation \_\_\_\_\_

Employed By \_\_\_\_\_ Address/Telephone \_\_\_\_\_

Email address \_\_\_\_\_

Other Children In Family		
Name _____	Birth date _____	School Attending _____
Name _____	Birth date _____	School Attending _____
Name _____	Birth date _____	School Attending _____
Name _____	Birth date _____	School Attending _____

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_