

STUDENT INFORMATION *Please Print*

| | | | | | | |
|-------------------|--------------|--------|------|------------------|--|---------------------|
| LEGAL Last Name | First | Middle | Sex | Place of Birth | Date of Birth | Grade Applying For |
| Religion | Home Address | City | Zip | Telephone () | Name & Address of School now attending | |
| SACRAMENTS | Date | Church | City | State | Zip | Verifying Signature |
| Baptism | | | | | | |
| Reconciliation | | | | | | |
| First Eucharist | | | | | | |

FAMILY INFORMATION

| | | | | | | |
|--|--------------------------------|------------------|----------|----------------|-------------------|-----------------------|
| Father: LEGAL Last Name | First | Middle | Religion | Place of Birth | Cell Phone () | |
| (If different from Student's address) | Occupation | Business Address | | City | Zip | Business Phone () |
| | Home Address | City | | State | Zip | Phone () |
| Mother: LEGAL Last Name | First | Maiden | Religion | Place of Birth | Cell Phone () | |
| (If different from Student's address) | Occupation | Business Address | | City | Zip | Business Phone () |
| | Home Address | City | | State | Zip | Phone () |
| Guardian: LEGAL Last Name | First | Middle | Religion | Place of Birth | Cell Phone () | |
| (If different from Student's address) | Occupation/Place of Employment | Business Address | | City | Zip | Business Phone () |
| | Home Address | City | | State | Zip | Phone () |

Home Situation (circle the # of the situation that applies)

1. Living with both parents
2. Parents separated: Living w/ Mother or Living w/ Father (Circle one)
3. Father not Living: living with Mother alone, Or Mother and Stepfather (Circle one)
4. Mother not Living: Living w/ Father alone, Or Father and Stepmother (Circle one)
5. Parents divorced: Living w/ Mother alone, Or Mother & Stepfather (Circle one)
6. Parents divorced: Living w/ Father alone, Or Father & Stepmother (Circle one)
7. Living with Guardians who are relatives
8. Living with Single Mother or Father (Circle one)
9. OTHER: _____ If #2 through #9 is circled:
10. Who has Custodial rights? _____

FOR OFFICE USE ONLY

Registration Fee: _____

Total Due: _____ Amount Paid: _____ Check #: _____ /Cash Balance: _____

Parish _____ How long in Parish? _____ Envelope # _____