
<u>Race/Ethnicity</u>
<input type="checkbox"/> White/Caucasian
<input type="checkbox"/> Black/African American
<input type="checkbox"/> Hispanic/Latino
<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> Asian
<input type="checkbox"/> Native Hawaiian or Pacific Islander

Date _____ Registration for Grade _____

PARISH MEMBER? YES ___ NO ___ PARISH _____

PLEASE NOTE THAT PARISH MEMBERS HAVE FIRST CHANCE AT REGISTRATION, THEN NON-MEMBERS WHO HAVE SIBLINGS HERE, AND THEN NON-MEMBERS ACCORDING TO REGISTRATION ORDER.

STUDENT DATA

Name _____ Sex M ___ F ___
(Last) (First) (Middle)

Home Address _____ Phone _____
(P.O. Box or Street) (City) (Zip)

Lives with: Both Parents ___ Mother ___ Father ___ Other _____

Present Age _____ Date of Birth _____
(Month) (Day) (Year)

Place of Birth _____
(City) (State)

Baptism _____
(Date) (Church) (City) (State)

FAMILY DATA

Father (or) Guardian _____
(Last Name) (First & Middle) (Religion)

Address _____ Phone _____

Mother _____
(Last Name) (Maiden name) (First & Middle) (Religion)

Address _____ Phone _____

Number of children in the family _____ Ages/Birthdates _____

ADDITIONAL INFORMATION

Transferred from _____
(School) (Address) (City) (State)

SPECIAL HEALTH INFORMATION _____