

REGISTRATION FORM



Preference:

3K half day M T W TH F 7:45 - 10:50am
Check all days you are attending

4K half day 7:45 - 10:50am

4K full day 7:45 - 2:40pm

I acknowledge that my child must be independently toilet trained by Sept. 1st

5K full day 7:45 - 2:40pm

Grade

Student Information

Date:	Name: (Last, First, Middle)
Primary Residence of Student: (street, city, state, zip)	
DOB:	Home School District:
Gender:	Cell # In Case of Emergency:
Ethnicity - Is the student Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No	What is the student's race? <input type="checkbox"/> (W) White <input type="checkbox"/> (B) Black or African American <input type="checkbox"/> (A) Asian <input type="checkbox"/> (I) American Indian or Alaska Native <input type="checkbox"/> (P) Native Hawaiian / Other Pac Islander <input type="checkbox"/> (E) Eastern Indian

Parent/Guardian 1

Name (Last, First)	Street, Apt/Suite:
City, State, Zip	Email:
Home Phone:	Employer:
Work Phone:	Employee Title:
Cell Phone:	Religion:
What # should be called first?	

Parent/Guardian 2

Name (Last, First)	Street, Apt/Suite:
City, State, Zip	Email:
Home Phone:	Employer:
Work Phone:	Employee Title:
Cell Phone:	Religion:
What # should be called first?	

Preferred email (Royal News, phone directory, classroom, school communications):

Are there court ordered restrictions that apply to this child? Y or N
(If yes, please attach a copy of the court order)

PLEASE ATTACH A COPY OF THE CHILD'S BIRTH CERTIFICATE

Child's place of baptism and date:

Previous school attended:

How did you hear about us?

Registered Parish: _____ Alumni of St. Mary's: (Y/N) _____

---\$120.00 per child non-refundable one-time registration fee required---