



Education with Higher Aspirations

STUDENT REGISTRATION FORM

2008-2009

Diocese of Kalamazoo

Child's Name _____ Grade _____ Sex: M F DOB ____/____/____
 Last First Middle M D YR

Address _____ Phone (____) _____ - _____

Parent's Cell (____) _____ - _____

City, State _____ Zip _____ SS# _____ - _____ - _____

Child would attend _____ School in the _____ Public School System

Date of Baptism _____ Location _____

Date of First Communion _____ Location _____

School last attended _____ Location _____

Special education services received _____

PARENT INFORMATION

MOTHER

FATHER

Name (include maiden) _____

Email Address _____

State of birth _____

Education status _____

Occupation _____

Employed by _____

Work phone (____) _____ - _____ (____) _____ - _____

Marital status _____

Step parent (if applicable) _____

With whom child resides _____

Religion _____

Parish _____

Name and birth dates of brothers and sisters living at home: _____

New Students: How did you hear about St. Mary's School? (Circle all that apply)

Web site Newspaper Mailing Billboard Other _____

Friend/Family Member (Name _____)

Signature of person registering child _____ Relationship to child _____

All information provided by me on this form is true and complete to the best of my knowledge.

Return all forms with \$50 non-refundable registration fee to the office by MAY 1, 2008. \$75 (after May 1, 2008)