

KINDERGARTEN REGISTRATION FORM

2011-12 SCHOOL YEAR

COMPLETE ENTIRE FORM AND RETURN. PRINT CLEARLY.

STUDENT Information

Registering: Prefer AM Session:___ Prefer PM Session:___ Either Session ___ Male () Female ()

Full Name _____
Last First Middle

Address * _____
City Zip

Social Security Number ____/____/____ Date of Birth ____/____/____

Phone _____ - _____ Place of Birth _____
City State

Student lives with () both natural or adoptive mother and father () father only () mother only
() mother and stepfather () father and stepmother () grandparent
() legal guardian, not relative () other: (explain) _____

* Ohio State law requires that the school have copies of any child custody order/decre

Duplicate mailings can be sent to students living in two households.

There is a \$15.00 to cover the additional postage costs.

() Please send duplicate mailings to below addresses different than above.

Student needs BUS transportation () to school () to home

Student Religion _____

Baptism () yes Date ____/____/____ Place _____
Church City State
() no

Reconci- () yes Date ____/____/____ Place _____
liation Church City State
() no

First () yes Date ____/____/____ Place _____
Eucharist Church City State
() no

Confir- () yes Date ____/____/____ Place _____
mation Church City State
() no

Received () yes Date ____/____/____ Place _____
into Catholic Church - R C I A Church City State

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PARENT / GUARDIAN Information

Father / Guardian Full Name _____
Last First Middle

Address (if different from student above) _____
City Zip

Occupation _____ Employer _____
() yes () no Active Duty Military

Work Phone _____ - _____ Cell Phone _____ - _____ Religion _____

() yes () no Active Saint.Luke Parishioner Parish Registration Date _____

OVER

School Office Only: Birth Certificate _____ Custody Papers _____ Baptismal Certificate _____
NON-REFUNDABLE Registration Fee / Student _____
\$150.00 (new) \$100.00 (current) Initials / Date ____/____/____

Parish Office Only: ck # _____ Amount \$ _____ Date _____

