



Admission Application for Grades 1-8: 2019-2020

Date: _____

Grade in September: _____

Child's Full Name: _____ Sex: ___ M ___ F
 First Middle Last

Address: _____
 Street City State Zip

Date of Birth: _____ Place of Birth: _____
 City State Country

Date of Baptism: _____ Parish of Baptism: _____
 Address City State

Sacraments Received: Date Parish City State

Reconciliation: _____

Holy Eucharist: _____

Confirmation: _____

Parish where currently registered: _____

Ethnicity: _____

Public School District of Residence: _____

Home Telephone: _____ Emergency Number: _____

Primary E-Mail Address: _____

Father's / Guardian's Full Name: _____

Religion: _____ Country of Birth: _____

Occupation: _____ Work #: _____ Cell: _____

Mother's / Guardian's Full Name: _____

Mother's Maiden Name: _____

Religion: _____ Country of Birth: _____

Occupation: _____ Work #: _____ Cell: _____

