

# St. Andrew School

## REGISTRATION FORM FOR:

\_\_\_\_\_ Last name First name Middle name

SSN: \_\_\_\_\_ Grade entering: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Kindergarten preference A.M. FULL (circle one)

Registered Parish: \_\_\_\_\_ Are you new to the School?: Y N (circle one)

Catholic: Y N (circle one)

Sex: M F Birth date: \_\_\_\_\_ Birthplace: \_\_\_\_\_  
M/D/Y City/State

Race: \_\_\_ White, Not Hispanic \_\_\_ Black, Not Hispanic \_\_\_ Hispanic \_\_\_ Other  
\_\_\_ Asian Pacific Islander \_\_\_ American Indian/Alaskan Native  
(You are not required to answer this question) Please Specify

Street Address: \_\_\_\_\_  
city state zip

Do you want your name, address and phone listed in the school directory? Y N

Will you be in need of Latchkey (after school) program? Y N Maybe (Separate registration in summer 2011)

School/Bus District: \_\_\_\_\_

e-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Father** Birth place: \_\_\_\_\_ Religion: \_\_\_\_\_  
**or guardian:** Education: \_\_\_\_\_ Occupation: \_\_\_\_\_  
**Name:** Place of occupation: \_\_\_\_\_ Business phone: \_\_\_\_\_  
Business address: \_\_\_\_\_

**Mother** Birth place: \_\_\_\_\_ Religion: \_\_\_\_\_  
**or guardian:** Education: \_\_\_\_\_ Occupation: \_\_\_\_\_  
**Name:** Place of occupation: \_\_\_\_\_ Business phone: \_\_\_\_\_  
Business address: \_\_\_\_\_

Home Status: \_\_\_ Parents divorced \_\_\_ Parents Separated \_\_\_ Single  
\_\_\_ Father deceased \_\_\_ Mother deceased \_\_\_ Married

Student lives with: \_\_\_ Both parents \_\_\_ Father \_\_\_ Mother \_\_\_ Step-Mother \_\_\_ Step-Father

### Sacraments:

Baptism \_\_\_\_\_  
First Communion \_\_\_\_\_  
Penance \_\_\_\_\_  
Confirmation \_\_\_\_\_  
M/D/Y Church City/State

School last attended: \_\_\_\_\_

Address: \_\_\_\_\_

Please attach a \$300.00 non-refundable registration fee to complete this registration.

OFFICE USE ONLY

\_\_\_\_\_ PPC