

Nursery	_____
Pre-K	_____
Kdg.	_____
Grs. 1-8	_____

**BLESSED SACRAMENT SCHOOL
2009-2010**

[] A.M. [] Full day

Registration Fee \$75.00
Cash ___ Check ___

FORM MUST BE FILLED IN COMPLETELY!!!

Student must be 3, 4 or 5 yrs. old by **December 1st**. **Please print all information.**

SECTION I Student Information SCHOOL DISTRICT _____

Student Name: _____ **Age:** _____ **Religion:** _____

Address: _____ **City:** _____ **Zip:** _____ **Phone:** _____
Unlisted? yes [] no []

Date of Birth: _____ **City:** _____ **State:** _____ **Sex:** male [] female []

Date of Baptism: _____ **Parish:** _____ **City:** _____

Legal Evidence of Age: _____ Birth Certificate _____
Other _____

Ethnic Origin: [] White [] Black [] Hispanic
[] Asian/Pacific [] Other _____

Child lives with: [] Both parents [] Mother [] Father **Other:** _____
Name Relationship

SECTION II - Parent/Guardian Information

The following information should be given regarding the adult(s) with whom the student resides.

RELATION (circle one): Father, Step-father, Grandfather, Uncle, Legal Guardian, Other _____

Name: _____ **Religion:** _____
First Last

Address: _____ **Phone:** _____

Employer: _____ **Bus. Phone:** _____

Marital Status: _____ **Cell Phone:** _____

RELATION (circle one): Mother, Step-mother, Grandmother, Aunt, Legal Guardian, Other _____

Name: _____ **Religion:** _____
First (Maiden Name) Last

Address: _____ **Phone:** _____

Employer: _____ **Bus. Phone:** _____

Marital Status: _____ **Cell Phone:** _____

