

# All Saints

## CATHOLIC SCHOOL

### REGISTRATION FORM SCHOOL YEAR 2018-2019

**Name:** \_\_\_\_\_ Grade in September: \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_ **City/Town:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Sex:**  Male  Female **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Place of Birth** \_\_\_\_\_  
Mo Day Year City State

**School Last Attended:** \_\_\_\_\_  
Name City State

**Father's Name:** \_\_\_\_\_ Catholic?  Yes  No  
Last First

**Contact Phone:** (h) \_\_\_\_\_ (w) \_\_\_\_\_ (cell) \_\_\_\_\_

**Email:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_ **Education:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ Catholic?  Yes  No  
Last First

**Contact Phone:** (h) \_\_\_\_\_ (w) \_\_\_\_\_ (cell) \_\_\_\_\_

**Email:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_ **Education:** \_\_\_\_\_

**Number of Children in Family:** Boys: \_\_\_\_\_ Girls: \_\_\_\_\_ **Number of this Child:** \_\_\_\_\_

How many of your children will be enrolled at All Saints Catholic School for the school year 2018-2019? \_\_\_\_\_

**Child lives with:**  Both Parents  Father  Mother  Other: \_\_\_\_\_

Does a legal custody arrangement exist which limits either parent's access to the child or access to his or her records? Yes \_\_\_\_\_ No \_\_\_\_\_ Not applicable \_\_\_\_\_

\*If yes, what is the date of the most recent court document? \_\_\_\_\_

(Please complete reverse side)

**PLEASE COMPLETE EACH LINE**

➤ Town of Legal Residence: \_\_\_\_\_

➤ Mother's Maiden Name: \_\_\_\_\_

➤ Child's Ethnicity: (Check one)

\_\_\_\_\_ American Indian/Native Alaskan    \_\_\_\_\_ Asian    \_\_\_\_\_ Black    \_\_\_\_\_ Hispanic

\_\_\_\_\_ Native Hawaiian/Pacific Islander    \_\_\_\_\_ White    \_\_\_\_\_ Multi Racial

➤ Primary Language Spoken at Home: \_\_\_\_\_

➤ Secondary Language (if applicable): \_\_\_\_\_

**TUITION STATUS** (Check one)

Category A: \_\_\_\_\_ Catholic family registered and participating (through weekly envelope usage) at:  
 \_\_\_\_\_ St. Paul the Apostle Parish: \_\_\_\_\_ St. Gabriel's \_\_\_\_\_ St. John's \_\_\_\_\_ St. Joseph's  
 \_\_\_\_\_ St. Mary's \_\_\_\_\_ St. Matthew's \_\_\_\_\_ St. Teresa's  
 \_\_\_\_\_ Parish of the Resurrection of the Lord: \_\_\_\_\_ Holy Family \_\_\_\_\_ St. Ann's, Bradley  
 \_\_\_\_\_ St. Anne's, Indian Island \_\_\_\_\_ Our Lady of Wisdom (Newman Center)  
 \_\_\_\_\_ Other Catholic Parish: \_\_\_\_\_  
Parish Name Church Name/City

Category B: \_\_\_\_\_ Non-Catholic family or non-participating Catholic family (No Parish subsidy)

Category C: \_\_\_\_\_ Any family choosing to pay full tuition (No Parish or school subsidy)

**Please complete one form for each child** you are registering for the 2018-2019 school year and enclose a non-refundable registration fee of **\$200 per family**. Registering by March 15, 2018 ensures that \$100 of the registration fee is applied toward next year's tuition. Registrations received after March 15<sup>th</sup> do not qualify for the tuition credit. Make checks payable to All Saints Catholic School and indicate "Registration Fee" on your check. Students are enrolled in the order indicated in the Student-Parent Handbook until the class is full. Additional students will be placed on a waiting list until space becomes available.

\_\_\_\_\_  
 Signature of Parent or Guardian Month / Day / Year

**FOR OFFICE USE ONLY**

Date: \_\_\_\_\_ Check # \_\_\_\_\_ Amount: \_\_\_\_\_ Cash Amount: \_\_\_\_\_ Initials \_\_\_\_\_