

NEW STUDENT ENROLLMENT APPLICATION 2022-2023

REGISTRATION FEE OF \$150.00 PER STUDENT FOR GRADES PRE-K THROUGH 8TH IS NON-REFUNDABLE APPLICATION WILL NOT BE PROCESSED UNTIL PAYMENT IS RECEIVED IN FULL

CHILD'S FULL NAME							•	IALE		FEN	1ALE_			
DATE OF BIRTH			INCOMING GRADE (CIRCLE ONE	K	1	2	3	4	5	6	7	8	
FOR PRESCHOOL ~ (CIR	RCLE ONE)		4 (CIRCLE # OF DAYS				(CIRC	LE ON	E) HAL	F DAY	OR	FULL D	ΑУ	
ADDRESS				E1	HNIC	ITY_								
CITY		S	TATE	ZIP CODE										
HOME # ()		CELL ()	EMAI	<u></u>									
Religion of Student		Parishioner of SS. C						. Cyril & Methodius <i>Yes No</i>						
lf not a Parishioner, ple	ase indicate	e what Parish the	student belongs to											
Baptism Date/_		Church						Y	State			te		
(If applicable)		//ChurchCity ut our school? If referred, please specify Family name							State					
Additional Family Inf														
Father (Full Name)			Mothe	r (Maiden N	ame _									
Address														
Religion			Religio	n										
Home #			Home	#										
Cell #			Cell #											
Email			Email											
Emergency Contact.	(Please	list someone othe	r than yourself or your s	spouse)										
Name						Ph	one # ()					
Name						Ph	one # (· ·)					
<u>Transfer Information</u>	ı (lf applic	cable)												
School last attended														
Address of school													_	
Did your child attend Pr	e-School X	'es No	·											
Language spoken at hom	ne													