

St. Elizabeth Ann Seton School

Registration Form

Office use only

DATE RECEIVED _____

GRADE ENTERING _____

SCHOOL YEAR _____

STUDENT'S FULL NAME (No Initials) _____

SOCIAL SECURITY # _____

| LAST NAME | FIRST NAME | FULL MIDDLE NAME | NICK NAME (IF USED) |
|------------------------|--------------|---------------------|---------------------|
| STREET ADDRESS _____ | | P.O.BOX _____ | |
| CITY _____ | | ZIP _____ | |
| HOME PHONE () _____ | | BIRTH DATE _____ | |
| CHILD'S RELIGION _____ | | ETHNIC ORIGIN _____ | |
| MALE _____ | FEMALE _____ | | |

WHEN SEND MAIL, ADDRESS TO (Circle One) MR./MRS. MR. MRS. MISS DR./MRS. MR./DR.

PARENTS/GUARDIANS

| | |
|------------------------------------------------|------------------------------------------------|
| MOTHER'S NAME _____ | FATHER'S NAME _____ |
| CELL NUMBER () _____ | CELL NUMBER () _____ |
| EMAIL _____ | EMAIL _____ |
| OCCUPATION _____ | OCCUPATION _____ |
| NAME OF BUSINESS _____ | NAME OF BUSINESS _____ |
| BUSINESS PHONE () _____ | BUSINESS PHONE () _____ |
| RELIGION _____ | RELIGION _____ |
| EDUCATION: HIGH SCHOOL COLLEGE GRADUATE SCHOOL | EDUCATION: HIGH SCHOOL COLLEGE GRADUATE SCHOOL |
| DIPLOMA OR DEGREE EARNED _____ | DIPLOMA OR DEGREE EARNED _____ |
| STEPFATHER _____ | STEPMOTHER _____ |

CHURCH PARISH IN WHICH YOU ARE REGISTERED _____

CHURCH PARISH IN WHICH YOU RESIDE _____

IF YOU ARE REGISTERED IN ST. ELIZABETH ANN SETON PARISH LIST STEWARDSHIP ENVELOPE NUMBER _____

SEE REVERSE SIDE

SCHOOL PREVIOUSLY ATTENDED

NAME OF SCHOOL

FULL ADDRESS (STREET, CITY, STATE, ZIP)

SACRAMENTS - DATES AND PLACES

DATE

PLACE SACRAMENT WAS PERFORMED

BAPTISM

RECONCILIATION

FIRST COMMUNION

CONFIRMATION

PLEASE INDICATE HOW YOU HAVE SHARED YOUR TIME AND TALENT OR HAVE SUPPORTED ST. ELIZABETH ANN SETON PARISH OR SCHOOL. DO NOT INDICATE FINANCIAL CONTRIBUTIONS OR STEWARDSHIP, AS FINANCIAL SUPPORT IS STRICTLY CONFIDENTIAL AND ON RECORD IN THE PARISH OFFICE ONLY.

I verify that all information supplied to the school is true. I understand that failure to supply complete and true information may result in loss of registration status. I understand that completion and submission of this application form does not guarantee admission to St. Elizabeth Ann Seton School.

PARENT'S SIGNATURE

DATE