

**Saint Christopher School  
Family Registration & Enrollment Form**

School Year: 2012-2013      Check  New or  Returning student

Student Name: \_\_\_\_\_ M/F \_\_\_\_\_

Student's Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Present School: \_\_\_\_\_ Present Grade: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_

Family Religious Affiliation: \_\_\_\_\_ Parish & Location: \_\_\_\_\_

**Home Info**

Parental Status:  Married  Separated  Divorced  Remarried  Single  Widow/Widower  
 Other

Students Live With:  Both Parents  Mother  Father  Mother/Stepfather  
 Father/Stepmother  Grandparents  Guardian

Language spoken at home:  English  Spanish Other: \_\_\_\_\_

Race\* (Optional, for statistical purposes only) :

- American Indian/Native Alaskan
- Asian
- Black
- Hispanic
- Pacific Islander/Native Hawaiian
- White
- Multi-Racial

Has your child ever been serviced for:

- Speech & Language
- Learning Disability
- Special Education
- Other \_\_\_\_\_

Fill in the address of the person/s with whom the student lives.

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address \_\_\_\_\_

Is either parent a graduate of St. Christopher School? Yes \_\_\_\_\_ or No \_\_\_\_\_

How did you hear about St. Christopher School (new students only)? \_\_\_\_\_

\* St. Christopher School does not discriminate on the basis of race, color, national or ethnic origin in the administration of its admission policies.

If the student is a Catholic, enter the following information if you have not previously submitted it.

Baptism Date: \_\_\_\_\_ Parish & Location: \_\_\_\_\_

First Reconciliation Date: \_\_\_\_\_ Parish & Location: \_\_\_\_\_

First Communion Date: \_\_\_\_\_ Parish & Location: \_\_\_\_\_

**Father**

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Bus. Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Father Religion: \_\_\_\_\_

**Mother**

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Bus. Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Mother Religion: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

**Transportation**

List anyone else who may pick up your student and relationship (e.g. aunt, neighbor).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Emergency Contact**

List a person who can be contacted in case of an emergency if Parent/Guardian is not available.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Medical**

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

Hospital: \_\_\_\_\_

If a non-custodial parent or guardian should receive academic information from the school, enter that information below.

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**Payment Options:**

- Pay in full
- 10 Monthly Payments
- I am interested in learning more about Tuition Assistance.

Prior to enrollment, a Health Assessment Record, a Birth Certificate, and a Baptismal Certificate, if not baptized at St. Christopher Parish, must be presented.

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_

*Please submit the Family Registration Fee (one fee per family) of \$50 with this form. Your family will not be considered registered for the 2012-2013 school year until the form and fee are received.*