



Student 1 Enrollment Form 2023-2024

Grade in which to enroll:

(For Preschool students complete the Preschool Form as well)

First Name: _____ Mid Initial: _____ Last Name: _____

Preferred First Name: _____ Family Last Name: _____

Birth Date: _____ City/State: _____ Male ☐ Female ☐ Catholic ☐ Non-Catholic ☐

Race (Check all that apply): ☐ American Indian ☐ Asian ☐ Black ☐ Hispanic ☐ Pacific Islander ☐ White

Other: _____

Previous School attended: _____

If the student is Catholic, enter the following. **(Baptism certificates are required at registration)**

Baptism

Date: _____ Parish & Location: _____

First Reconciliation

Date: _____ Parish & Location: _____

First Communion

Date: _____ Parish & Location: _____

Confirmation

Date: _____ Parish & Location: _____

List any special educational or instructional needs here: _____

Does your child currently have or has your child ever had an IEP, 504 Plan, or Student Accommodation Plan?

☐ Yes ☐ No If yes, please explain

Has your child ever had any screenings through a School District or Physician?

☐ Yes ☐ No If yes, please explain

Comments: Enter any additional comments about this student here: _____

The School Office will not accept registration forms unless accompanied by the student's birth certificate and baptismal certificate.



Student 2 Enrollment Form 2023-2024

Grade in which to enroll:

(For Preschool students complete the Preschool Form as well)

First Name: _____ Mid Initial: _____ Last Name: _____

Preferred First Name: _____ Family Last Name: _____

Birth Date: _____ City/State: _____ Male ☐ Female ☐ Catholic ☐ Non-Catholic ☐

Race (Check all that apply): ☐ American Indian ☐ Asian ☐ Black ☐ Hispanic ☐ Pacific Islander ☐ White

Other: _____

Previous School attended: _____

If the student is Catholic, enter the following. **(Baptism certificates are required at registration)**

Baptism

Date: _____ Parish & Location: _____

First Reconciliation

Date: _____ Parish & Location: _____

First Communion

Date: _____ Parish & Location: _____

Confirmation

Date: _____ Parish & Location: _____

List any special educational or instructional needs here: _____

Does your child currently have or has your child ever had an IEP, 504 Plan, or Student Accommodation Plan?

☐ Yes ☐ No If yes, please explain

Has your child ever had any screenings through a School District or Physician?

☐ Yes ☐ No If yes, please explain

Comments: Enter any additional comments about this student here: _____

The School Office will not accept registration forms unless accompanied by the student's birth certificate and baptismal certificate.



Student 3 Enrollment Form 2023-2024

Grade in which to enroll:

(For Preschool students complete the Preschool Form as well)

First Name: _____ Mid Initial: _____ Last Name: _____

Preferred First Name: _____ Family Last Name: _____

Birth Date: _____ City/State: _____ Male ☐ Female ☐ Catholic ☐ Non-Catholic ☐

Race (Check all that apply): ☐ American Indian ☐ Asian ☐ Black ☐ Hispanic ☐ Pacific Islander ☐ White

Other: _____

Previous School attended: _____

If the student is Catholic, enter the following. **(Baptism certificates are required at registration)**

Baptism

Date: _____ Parish & Location: _____

First Reconciliation

Date: _____ Parish & Location: _____

First Communion

Date: _____ Parish & Location: _____

Confirmation

Date: _____ Parish & Location: _____

List any special educational or instructional needs here: _____

Does your child currently have or has your child ever had an IEP, 504 Plan, or Student Accommodation Plan?

☐ Yes ☐ No If yes, please explain

Has your child ever had any screenings through a School District or Physician?

☐ Yes ☐ No If yes, please explain

Comments: Enter any additional comments about this student here: _____

The School Office will not accept registration forms unless accompanied by the student's birth certificate and baptismal certificate.



Student 4 Enrollment Form 2023-2024

Grade in which to enroll:

(For Preschool students complete the Preschool Form as well)

First Name: _____ Mid Initial: _____ Last Name: _____

Preferred First Name: _____ Family Last Name: _____

Birth Date: _____ City/State: _____ Male ☐ Female ☐ Catholic ☐ Non-Catholic ☐

Race (Check all that apply): ☐ American Indian ☐ Asian ☐ Black ☐ Hispanic ☐ Pacific Islander ☐ White

Other: _____

Previous School attended: _____

If the student is Catholic, enter the following. **(Baptism certificates are required at registration)**

Baptism

Date: _____ Parish & Location: _____

First Reconciliation

Date: _____ Parish & Location: _____

First Communion

Date: _____ Parish & Location: _____

Confirmation

Date: _____ Parish & Location: _____

List any special educational or instructional needs here: _____

Does your child currently have or has your child ever had an IEP, 504 Plan, or Student Accommodation Plan?

☐ Yes ☐ No If yes, please explain

Has your child ever had any screenings through a School District or Physician?

☐ Yes ☐ No If yes, please explain

Comments: Enter any additional comments about this student here: _____

The School Office will not accept registration forms unless accompanied by the student's birth certificate and baptismal certificate.



Student 5 Enrollment Form 2023-2024

Grade in which to enroll:

(For Preschool students complete the Preschool Form as well)

First Name: _____ Mid Initial: _____ Last Name: _____

Preferred First Name: _____ Family Last Name: _____

Birth Date: _____ City/State: _____ Male ☐ Female ☐ Catholic ☐ Non-Catholic ☐

Race (Check all that apply): ☐ American Indian ☐ Asian ☐ Black ☐ Hispanic ☐ Pacific Islander ☐ White

Other: _____

Previous School attended: _____

If the student is Catholic, enter the following. **(Baptism certificates are required at registration)**

Baptism

Date: _____ Parish & Location: _____

First Reconciliation

Date: _____ Parish & Location: _____

First Communion

Date: _____ Parish & Location: _____

Confirmation

Date: _____ Parish & Location: _____

List any special educational or instructional needs here: _____

Does your child currently have or has your child ever had an IEP, 504 Plan, or Student Accommodation Plan?

☐ Yes ☐ No If yes, please explain

Has your child ever had any screenings through a School District or Physician?

☐ Yes ☐ No If yes, please explain

Comments: Enter any additional comments about this student here: _____

The School Office will not accept registration forms unless accompanied by the student's birth certificate and baptismal certificate.