

OUR LADY OF FATIMA SCHOOL - REGISTRATION FORM

I. FAMILY INFORMATION (Please Print)

Home Address: _____
Street City State Zipcode

Home Phone _____ Parish Registered number/code: _____ Non Parishioner: _____

Parish: _____ Location: _____

Mother's Name _____ Religion: _____
Last Name First Name

Mother's Employer & Address : _____
 _____ Phone: _____

Occupation: _____ Cell Phone: _____

Father's Name: _____ Religion: _____
Last Name First Name

Father's Employer & Address: _____
 _____ Phone: _____

Occupation: _____ Cell Phone: _____

Home situation: () both parents; () single parent; () parents separated/divorced; () father remarried; () mother remarried
 Parental rights (in case of separation/divorce): _____

II. STUDENT(S) INFORMATION (Please Print)

Student 1: _____ DOB _____ Sex: _____
Last Name First Name

Grade for September _____ Place of birth: _____ Religion: _____

Ethnic Origin: WHITE; BLACK; HISPANIC; AMERICAN INDIAN; MULTI-RACIAL;
 ASIAN/PACIFIC ISLANDER; OTHER _____

Is child a United State citizen? Yes No Child resides with _____

School Name and address of the previous school: _____

Sacraments	Parish	Location	Date
Baptism			
Penance			
First Communion			

Language spoken at home: _____ Language of student: _____
(other than English) (other than English)

Student 2: _____ DOB _____ Sex: _____
Last Name First Name

Grade for September _____ Place of birth: _____ Religion: _____

Ethnic Origin: WHITE; BLACK; HISPANIC; AMERICAN INDIAN; MULTI-RACIAL;
 ASIAN/PACIFIC ISLANDER; OTHER _____

Is child a United State citizen? Yes No Child resides with _____

School Name and address of the previous school: _____

Sacraments	Parish	Location	Date
Baptism			
Penance			
First Communion			

Language spoken at home: _____ Language of student: _____
(other than English) (other than English)

Other sibling(s) residing at home	Date of Birth

Date _____	FOR OFFICE USE ONLY	<input type="checkbox"/> Cash	<input type="checkbox"/> Check	<input type="checkbox"/> Process
	Amount _____			

