

St. Stephen the Martyr School Registration Form

Grade for upcoming school year: _____ Previous Preschool/School _____

Student's Name: _____

Student's Birthdate _____ Male ___ Female ___ School District _____
Last First Middle Nickname
 Neighborhood _____

Student lives with: ___Both Parents ___Mother ___Father ___Other_____

Student's Racial/Ethnic Classification (please check one)

___American Indian/Alaska Native ___Asian ___Black or African American ___Pacific Islander/Hawaiian
 ___White ___Hispanic ___Multi-Race (if multi-race, please mark all boxes that apply)

Student's Religious Affiliation _____ Parish _____

Father's/Stepfather's Name _____

First Middle Last

Father's Religious Affiliation _____ E-mail _____

Home Address _____

Address City State Zip code

Home phone _____ Cell phone _____ Cell phone carrier _____

 Father's place of employment Father's Position/Title Business Phone

Mother's/Stepmother's Name _____

First Middle Last

Mother's Religious Affiliation _____ E-mail _____

Home Address _____

Address City State Zip code

Home phone _____ Cell phone _____ Cell phone carrier _____

 Mother's place of employment Mother's Position/Title Business Phone

Name of Sisters/Brothers	Age	School attending	Grade
_____	___	_____	___
_____	___	_____	___
_____	___	_____	___

All registrations must also include the tuition payment, elunch authorization form, and cash or check for registration fee

Documents needed on file for **kindergarten** and **new students**:

- Baptismal certificate
- Birth certificate –original
- Physical exam and updated immunization documentation for Kindergarten and 7th grade
- Dental: Date of most recent dental exam for Kindergarten
- Preschool report card-- for Kindergarten registration