

Saint Bernard School Registration

Please Print:

Grade Entering _____ AM ___ PM ___ AD ___ Registration Date _____

Name of child as shown on Birth Certificate:

Last _____ First _____ Middle _____

Date of Birth _____ City & State of Birth _____

Child's LEGAL family name *if different than above:* _____

Home Address _____ City / State _____ Zipcode _____

Home Phone Number _____ School District _____

FATHER

Last Name _____ First _____

Religion _____

Occupation _____

Email _____

Cell Phone _____

Address (if different from child)

MOTHER

Last Name _____ First _____

Maiden Name _____

Religion _____

Occupation _____

Email _____

Cell Phone _____

Address (if different from child)

No. of Brothers : Older ___ Younger ___

No. of Sisters: Older ___ Younger ___

What relatives (or others) live with family? _____

LEGAL GUARDIAN (Other than parent/step-parent) _____

Person with whom pupil will reside if not Parent/Guardian _____

School Last Attended _____ Grade Level _____

School Address _____ Zipcode _____

Name of other schools attended in addition to the one mentioned above:

School _____ Address _____ Grade _____

School _____ Address _____ Grade _____

Did this pupil repeat any grade in school? If so, state grade level _____

Any physical or emotional problems about which the school should know _____

Is your child eligible for an I.E.P. (Individualized Educational Plan)? _____

Additional Information _____

Are you currently registered at St. Bernard's Parish? _____

If not, name parish you are registered _____

SACRAMENT RECORD

Baptism	Penance	Holy Eucharist	Confirmation
Date _____	_____	_____	_____

Church _____	_____	_____	_____
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City/State _____	_____	_____	_____
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