



Saint Brigid School

Application Entering Grade _____

Sib(s) in Grade(s) _____

Please TYPE or PRINT

Last		First		Middle		Birthday		Birthplace					
Child's Name													
Street & No.			Apt #		City		Zip Code		Home Phone				
Home Address													
Religion		Parish (for Catholics)		Date of Baptism		Church/Place		Date of First Communion		Church/Place			
Last		First		Middle				Phone Home					
Father's Name													
Place of Birth			Ethnicity		Citizenship		Religion		Cell				
Address (If different from above)					Occupation			Work					
					Employer								
Last		First		Middle				Phone Home					
Mother's Name													
Place of Birth			Ethnicity		Citizenship		Religion		Cell				
Address (If different from above)					Occupation			Work					
					Employer								
If child DOES NOT live with natural parent(s)													
Name of Guardian		Last		First		Middle				Phone Home			
Relationship to child										Cell			
Home Address		Street & No		Apt #		City		Zip		Work			
Employer			Occupation										
Home Condition													
<input type="checkbox"/> Both natural parents <input type="checkbox"/> Parents Separated <input type="checkbox"/> Father Re-married <input type="checkbox"/> Father Deceased <input type="checkbox"/> Guardian <input type="checkbox"/> Single Parent <input type="checkbox"/> Parents Divorced <input type="checkbox"/> Mother Re-married <input type="checkbox"/> Mother Deceased													
Current School						School Address							
List schools you are applying to in order of preference High(1) to Low (4). Include Saint Brigid in your list.													
School 1		_____											
School 2		_____											
School 3		_____											
School 4		_____											
Any other schools not in your top 4.													

How did you learn about our school?

Emergency Information. In the event of apparent illness or accident, when I cannot be reached, the school may notify any of the following by telephone. They are authorized to act in my absence, and are informed that their names have been used on this form.

Name	Address	Day Phone
Name	Address	Day Phone
Family Doctor	Phone	Family Dentist Phone

Does your child have a health condition that may require immediate medical attention?

Agreement We realize that school training is not a substitute for a good Catholic home training but a continuation of it. The registration of a student at St. Brigid School is deemed to be an important agreement with the student's parents or guardians, to fully comply with all the policies, rules and regulations of the school.

Mother's Signature

Father's Signature

Mother's E-mail

Father's E-mail

OFFICE USE

Application Fee/Check #/Date Received

Registration Fee/Check #/D OFFICE USE