

## St. Eugene School

Registration School Year 2016- 2017 Sunday Env # \_\_\_\_\_ Grade: \_\_\_\_\_

Pre-S: T-W-T a.m. or all day or M-T-W-T-F a.m. or all day only

Pre-K: M-T-W-T-F a.m. only or M-T-W-T-F all day

Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email address (please print): \_\_\_\_\_

Child's Birthdate: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Baptismal Date: \_\_\_\_\_ Church: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

First Communion Date: \_\_\_\_\_ Church: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Confirmation Date: \_\_\_\_\_ Church: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Father's Name: \_\_\_\_\_ Address (If different) \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Religion: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Ethnicity (Please circle one) Caucasian (white) Caucasian/Asian Caucasian/Hispanic

Hispanic American Indian Asian African American Caucasian/African American

Mother's Name: \_\_\_\_\_ Address (If different) \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Religion: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Ethnicity (Please circle one) Caucasian (white) Caucasian/Asian Caucasian/Hispanic

Hispanic American Indian Asian African American Caucasian/African American

Marital Status: ( ) married ( ) divorced ( ) single ( ) Father Deceased ( ) Mother Deceased

Transferred From: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Reason: \_\_\_\_\_

Note: \$50.00 Registration fee (non-refundable) \$100.00 deposit (non-refundable)

To be eligible for the parishioner rate of tuition, Sunday church envelopes must be used regularly. The expected weekly contribution is \$10.00. All certificates and deposits must be received before registration is finalized.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_