

## **REGISTRATION**

*Please fill out the following for and place in the large brown folder. PRINT CLEARLY  
OR Email the information to [dmay@saintagnesschool.org](mailto:dmay@saintagnesschool.org).*

### **SINGER INFORMATION**

Singer's Name (First, MI, Last): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone#: (\_\_\_\_) \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

### **PARENT INFORMATION**

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### **PLEASE CHOOSE THE BEST FORMS OF COMMUNICATION**

Mother's Home Phone#: (\_\_\_\_) \_\_\_\_\_ Work Phone#: (\_\_\_\_) \_\_\_\_\_

Mother's Cell Phone#: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Father's Home Phone#: (\_\_\_\_) \_\_\_\_\_ Work Phone#: (\_\_\_\_) \_\_\_\_\_

Father's Cell Phone#: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Relationship to Singer: \_\_\_\_\_ Phone#: (\_\_\_\_) \_\_\_\_\_