



**St. Mary's Catholic School
2017-18 Registration Form
415 S. 7th Ponca City, Oklahoma 74601**

Enrollment Fee Paid
Date: _____
Amount: _____
Check #: _____
(Office Use Only)

Family Name (Will receive correspondence)		Mailing Address City Zip		Home Phone NUMBER WILL BE USED BY ONECALLNOW	Is your family a registered member of St. Mary's Parish? Yes No	(Office Use Only) Date Form Received _____
Family Member One Please circle: Mr. Mrs. Ms. Dr. Miss	First Name	Last Name		Relation to Student	Church Affiliation	
Employer/Occupation				Work Phone	Cell Phone	
<hr/>						
Family Member Two Please circle: Mr. Mrs. Ms. Dr. Miss	First Name	Last Name		Relation to Student	Church Affiliation	
Employer/Occupation				Work Phone	Cell Phone	
Email Address (for the family)						
Family Doctor		Family Doctor's Phone	Child's Sitter		Child's Sitter's Phone	Registered at St. Mary's Child Care? Yes No
Additional address to which correspondence should be sent:						

Check all that are appropriate:

<i>Mother deceased</i>	<input type="checkbox"/>
<i>Father deceased</i>	<input type="checkbox"/>
<i>Parents separated</i>	<input type="checkbox"/>
<i>Parents divorced</i>	<input type="checkbox"/>
<i>Mother remarried</i>	<input type="checkbox"/>
<i>Father remarried</i>	<input type="checkbox"/>

Student lives with:

<i>Mother & Father</i>	<input type="checkbox"/>
<i>Mother</i>	<input type="checkbox"/>
<i>Father</i>	<input type="checkbox"/>
<i>Legal Guardian</i>	<input type="checkbox"/>
<i>Stepmother</i>	<input type="checkbox"/>
<i>Stepfather</i>	<input type="checkbox"/>

Thank you for writing legibly and filling out the information completely.

Student Last Name	Student First Name	Student Middle Name	Attended St. Mary's in 2016-17?	Gender (M or F)	Enrolling in Grade	Social Security Number (optional)	Birthdate mm/dd/yyyy	Student Race/Ethnicity (optional) (A) Asian; (N) Native American; (H) Hispanic/Latino; (W) White/Caucasian; (B) Black/African American; (P) Native Hawaiian/Pacific Islander; (M) Multi-Racial

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EMERGENCY CONTACT INFORMATION

In the event of an emergency such as illness during school hours, please identify at least two reliable contacts and a way to reach them during school hours:

Contact Name:	Relation to Student	Home Phone	Cell Phone	Work Phone	Permission to pick up student? (Circle one)
					YES NO
					YES NO
					YES NO

PARENT PERMISSION FOR EMERGENCY MEDICAL TREATMENT

St. Mary's School 415 S. 7th Ponca City, OK 74601 Phone: (580)765-4387

Family Name _____

Student Last Name	Student First Name	Medical Alert Information	Gender (M or F)	Grade	Birthdate mm/dd/yyyy

(1) **Circle "a", "b" or "c" below:**

- a. We do give the school permission to give immediate medical attention as prescribed by a doctor. Notify us as soon as possible.
- b. We do give the school permission to give immediate medical attention as prescribed by a doctor, only if you have tried and failed to reach us.
- c. We do not give permission for medical attention until we have been contacted.

- (2) We do give the school permission to give medication to our child that we as parents have sent to the school. We also understand that all medicine will be kept in the school's office and that our child is responsible for coming to the office and taking his/her own dosage. **You must have a physician's written authorization to allow the office to give a specific medication.**
- (3) Our son/daughter may participate in any school related event such as field trips, concerts, picnics, etc. We understand that by giving our permission for him/her to go on this approved trip, we release the driver and the school from responsibility for individual accidents or injury. By signing this statement, we give permission for hospital and medical treatment if necessary.
- (4) Our son/daughter has our permission to walk from St. Mary's School to the library, businesses, fire station, police station, or any other educational place when the event is scheduled by the teacher.

Parent Signature

Telephone Number / Cell Phone Number

Date

Family Name

Student Last Name	Student First Name	Grade

PERMISSIONS: Please read and circle your choice, giving or denying permission:

We publish a *Family Directory*, distributed to school families only, which includes family and student name and grade, address and the phone numbers provided above. Please indicate whether we may publish your information by your signature below:

I **give or deny (circle)** permission for our family contact information to be published in the *St. Mary's Family Directory*.

Parent Signature _____ Date _____

News articles and pictures are submitted to newspapers, and may be published on our web site. Please indicate whether we may publish your child's name, and/or picture, and/or video by your signature below:

I **give or deny (circle)** permission for my child(ren)'s pictures and names to be published in media including our web site.

Parent Signature: _____ Date _____

**St. Mary's Catholic School
Philosophy Statement**

The aim of St. Mary's Catholic School is to assist parents/guardians in their responsibility of education and formation of their children. St. Mary's School recognizes that each member of our community has worth and value as a child of God. St. Mary's School assists each person in identifying his/her unique gifts and talents, and encourages their use in service to the community in building up the kingdom of God.

This educational community exists as a ministry of the Catholic Church of St. Mary. St. Mary's School ministers to the parish through participation in liturgical ministries, provision of religious education to members, and development of community spirit through service opportunities and celebrations. Students and staff are encouraged and expected to live the teachings of Jesus Christ by practicing respect, courtesy, compassion, peace and justice, and service among each other, at school, at home, and in the larger community.

St. Mary's Catholic School orients a child's whole life by striving to nurture each student's potential and advance his/her growth in lifelong faith, moral values, healthy self-esteem, physical development, technological communications, appreciation of the arts, and academic excellence.

Mission Statement

St. Mary's Catholic School is committed to providing academic excellence in a safe, nurturing environment following the teachings of Jesus for the development of the whole child.

In the operation of St. Mary's Catholic School, no child will be discriminated against because of race, sex, color or national origin. If you feel that you have been discriminated against, please contact Reverend Carson Krittenbrink, Pastor; 408 S. 8th St.; Ponca City, OK 74601.