

REGISTRATION CHECKLIST

KINDERGARTEN – EIGHTH GRADE

STUDENT NAME: _____

FAMILY NAME: _____

BIRTH DATE: _____

Please return the following document and fees to the school office.

_____ Parent - School Agreement

_____ Non-refundable Registration fee of \$150 for first child and \$125 for each additional child

\$_____ received by Check # _____ or Cash _____ - Initial of recipient _____

_____ Non-refundable \$250 deposit

\$_____ received by Check # _____ or Cash _____ - Initial of recipient _____

_____ Copy of Birth Certificate

_____ Copy of Baptismal Certificate

_____ Copy of Immunization Records with Physician's Stamp

_____ Parishioner card or letter from pastor

_____ Copy of recent report cards

_____ Elementary Record

_____ Signed request for records form

_____ Book Order Form (one per student)

_____ Transportation Form (one per student)

_____ Technology Agreement

_____ Family Info Sheet

_____ After School Care

_____ Student Application