



## 2020-21 Pre-Registration Form

DATE \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ D.O.B. \_\_\_\_\_ M \_\_\_ F \_\_\_

SIBILINGS YOU DESIRE TO ATTEND HOLY SPIRIT CATHOLIC SCHOOL

CHILD'S NAME \_\_\_\_\_ D.O.B. \_\_\_\_\_ M \_\_\_ F \_\_\_

CHILD'S NAME \_\_\_\_\_ D.O.B. \_\_\_\_\_ M \_\_\_ F \_\_\_

CHILD'S NAME \_\_\_\_\_ D.O.B. \_\_\_\_\_ M \_\_\_ F \_\_\_

Are you Catholic? Y \_\_\_ N \_\_\_ (If yes, in which parish are you registered? \_\_\_\_\_)

MOTHER'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ALTERNATE CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_

*(To be used when we are unable to contact parent(s)).*

I understand that by paying the registration fees and submitting this form, I am making a formal commitment to Holy Spirit Catholic School for the 2020-21 school year. I understand the registration fees are non-refundable.

\_\_\_\_\_

Name

Date