



St. Hilary of Poitiers School

New Student Registration: 2012-2013

Family Name _____ Religion _____

Parish _____ Male Female

Child's Name _____
Last First Middle

SSN _____ Date of Birth _____ Place of Birth _____

Race White African American Hispanic Asian Native American Other

Address _____
Street City/State Zip

Home Phone _____ County of Residence _____

Public School District of Residence _____

Mother's First Name/Maiden Name Religion Country of Birth Check if Deceased

Mother's Cell # _____ Mother's Primary eMail _____

Mother's Work # _____ Mother's Secondary eMail _____

Father's First Name (and Last, if different) Religion Country of Birth Check if Deceased

Father's Cell # _____ Father's Primary eMail _____

Father's Work # _____ Father's Secondary eMail _____

Baptism _____
Date Church Address City/State Zip

School Currently Attending _____
Name of School

School Address _____

Grade Registering for September: Kindergarten (Full Day) Grade 3 Grade 6
 Half Day Pre-K Grade 1 Grade 4 Grade 7
 Full Day Pre-K Grade 2 Grade 5 Grade 8

Language spoken at home if not English _____

Home Situation (Check all that apply)

- Two biological parents Father/Stepmother Parents separated or divorced
 Mother/Stepfather One parent Other: Specify _____

Is there a custody agreement concerning you child? Yes No

If yes, include a copy. (All court decrees must be on file in the school office.)

- Parental Rights (In case of separation or divorce) Legal Custody Joint Custody Sole Custody
Physical Custody Joint Custody Sole Custody
 Mother
 Father
 Guardian

Has your child received any of the following at school?

- Speech Service Yes No Guidance Service Yes No
Reading Remediation Yes No Educational Evaluation Yes No
Math Remediation Yes No (If yes, include a copy)

Name any other services received by your child _____

Are you requesting bus transportation for your child? Yes No

Will your child require after school care in our CARES Program?

- Yes, Frequently Yes, Occasionally Maybe/Not Sure No

Completion of all forms and verification of all documents finalizes registration.

Signature _____ Date _____

FOR OFFICE USE ONLY

- Verification of Forms Registration Fee (Non-Refundable)
_____ Birth Certificate
_____ Baptismal Certificate Check # _____
_____ Custody Agreement
_____ Immunization Records Cash _____

Date _____ Registrar _____