ST. RAPHAEL CATHOLIC SCHOOL NEW STUDENT REGISTRATION APPLICATION **KG-8th GRADE** SCHOOL YEAR: 2018-19

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CHILD'S LAST NAME	FIRS	T	MIDDLE	D.O.B.	MALE FEN	
MAILING ADDRESS	СІТҮ		ZIP CHILD'S RELIGION			
ENTERING GRADE	DATE		FAMILY PRIMARY EMAIL ADDRESS			
CHOOL PREVIOUSLY ATTENDED ADDRESS		ADDRESS		PHONE		
FATHER'S NAME	ADDI	RESS IF DIFFEREN	T THAN ABOVE		RELIGION	
OCCUPATION	PLACE OF EMPLOYM	ENT	WORK PHONE	HOME PHONE		
CELL PHONE			FATHER'S EMAIL			
MOTHER'S NAME	MAIDEN NAME	ADDRESS IF	DIFFERENT THAN A	BOVE	RELIGION	
OCCUPATION	PLACE OF EMPLOYMENT		WORK PHONE HOME PHONE			
CELL PHONE			MOTHER'S EMAIL			
PARENT STATUS:						
CHILD LIVES WITH:	☐ BOTH PARENTS			SHARED CUSTO	DY	
PARISH STATUS:		O NON-PARIS	HIONER – PARISH N	AME:		
ETHNICITY:	□AMERICAN INDIA □HISPANIC □NA			_	MULTI RACIA	
	ONLY: Date Receive cate Bap					