

## Kindergarten Registration Form

*Please circle if your kindergarten child is FULL DAY or HALF DAY*

**FOR OFFICE USE ONLY:**

Date received: \_\_\_\_\_ Initials: \_\_\_\_\_ Records: Transcripts \_\_\_\_\_ Health Records \_\_\_\_\_ Birth  
Certificate: \_\_\_\_\_ Immunizations \_\_\_\_\_ Baptismal Certificate \_\_\_\_\_ Pastor Verification \_\_\_\_\_

Application fee Non Refundable: \$50/Family \_\_\_\_\_

School District \_\_\_\_\_

Child #1's full name \_\_\_\_\_ Grade entering \_\_\_\_\_  
Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_ Sex \_\_\_\_\_  
School previously attended \_\_\_\_\_  
School Address \_\_\_\_\_

Child #2's full name \_\_\_\_\_ Grade entering \_\_\_\_\_  
Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_ Sex \_\_\_\_\_  
School previously attended \_\_\_\_\_  
School Address \_\_\_\_\_

**Parent/Guardian Information**

**Mother's Name** \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ Cell Phone \_\_\_\_\_  
Employer \_\_\_\_\_ Work Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

**Father's Name** \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ Cell Phone \_\_\_\_\_  
Employer \_\_\_\_\_ Work Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

**Guardian's Name** \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ Cell Phone \_\_\_\_\_  
Employer \_\_\_\_\_ Work Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

*(Please complete back side of this sheet.)*

How did you hear about Holy Trinity School? \_\_\_\_\_

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With whom does the student live? Both parents \_\_\_\_\_ Mother only \_\_\_\_\_ Father only  
\_\_\_\_\_ Guardian \_\_\_\_\_ Joint custody \_\_\_\_\_

Catholic (Y/N) \_\_\_\_\_ Parish \_\_\_\_\_  
Religious Denomination \_\_\_\_\_

**Ethnic Background:**

AK Native   American Indian   Asian   African-American  
  Hispanic   Caucasian   Other \_\_\_\_\_

What special services has your child received while attending other  
schools? \_\_\_\_\_  
\_\_\_\_\_

Did your Child have an IEP? Yes \_\_\_\_\_ No \_\_\_\_\_

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**Family Information**

**Brothers and or Sisters**

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School Attending \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School Attending \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School Attending \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School Attending \_\_\_\_\_

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Date \_\_\_\_\_

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Signature \_\_\_\_\_