



PREK \_\_\_\_\_

K-8TH \_\_\_\_\_

St. Anne School Registration

PLEASE...Fill Out and complete **ALL QUESTIONS** on this form to ensure registration!

(Please Print)

Referred by \_\_\_\_\_

Registration Date \_\_\_\_\_

Student Name: \_\_\_\_\_ M \_\_\_\_\_ F

Last Name

First Name

Middle Name

Address: \_\_\_\_\_

Street

City

Zip Code

ENTERING GRADE \_\_\_\_\_

Date of Birth: \_\_\_\_\_ City and State of Birth \_\_\_\_\_

Child's Ethnicity: Asian \_\_\_\_\_ Am. Indian \_\_\_\_\_ African American \_\_\_\_\_ Hispanic \_\_\_\_\_ Pacific \_\_\_\_\_ Caucasian \_\_\_\_\_  
Other \_\_\_\_\_

Preschool Attended or Previous School: \_\_\_\_\_

Permission to speak to Preschool or Previous School: \_\_\_\_\_ Yes \_\_\_\_\_ No

Public School District child primarily resides in \_\_\_\_\_

Public School child would attend if placed in public School \_\_\_\_\_

\*\*\*\*\*


(Check one) Kindergarten: \_\_\_\_\_ Full Day \_\_\_\_\_ Half-Day

Preschool: \_\_\_\_\_ 3 Yr. Old (3 day AM) \_\_\_\_\_ 3 Yr. old (5 day AM) \_\_\_\_\_ 4 Yr. Old Half-Day \_\_\_\_\_ 4 Yr. Old Full Day

(ALL Preschool students must be potty-trained)

Required Documents for Kindergarten & Preschool only: \_\_\_\_\_ Birth Certificate \_\_\_\_\_ Immunization Record

If Applicable: \_\_\_\_\_ Custody Order \_\_\_\_\_ Baptismal Certificate \_\_\_\_\_ PFA

Continue on back please 

Child's Primary Guradian: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Primary Guardian 1

Primary Guardian 2

Name \_\_\_\_\_

Tel. Home \_\_\_\_\_

Cell \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

\*\*Address (if different from student) Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Step Parent/Guardian \_\_\_\_\_

Parent Religion \_\_\_\_\_

Member St. Anne Parish \_\_\_Y\_\_\_N If No, Name of Parish \_\_\_\_\_

Student Sacramental Record: Baptism\_\_\_ Penance\_\_\_ Eucharist\_\_\_ Confirmation\_\_\_

Probational Enrollment Date: (K-8<sup>th</sup>) as required \_\_\_\_\_

**\*\*ALL FAMILIES MUST Be Registered on the FACTS Online Tuition Payment Program\*\***

**Must choose one** \*\*FACTS Expected tuition Plan: One Payment \_\_\_ Monthly \_\_\_ Quarterly \_\_\_ Four payment \_\_\_

Siblings who attend Other Schools\*\*\* (REQUIRED INFORMATION for Federal/Local Reporting and /or EPSF Scholarship)

Name \_\_\_\_\_ Gr. \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Gr. \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Gr. \_\_\_\_\_ School \_\_\_\_\_

**\*\*By registering my child/and I. agree to abide by all the rules/regulations contained in the current School Handbook. A copy of the handbook is available on the St. Anne School Website. [www.stannebethlehem.org](http://www.stannebethlehem.org)**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*Non-Refundable Registration Fee Due at Time of Registration \$200 K-8th Gr./ \$75.00 Preschool**

\*\*\*\*\*School Use Only\*\*\*\*\*

Birth certificate\_\_\_ Baptismal Certificate\_\_\_ Confirmation Certificate\_\_\_ Custody Order\_\_\_

PA Act 372 Transportation Req. \_\_\_ Proof of Immunization\_\_\_ Tuition Plan\_\_\_ FACTS Tuition\_\_\_ Facts Grant\_\_\_

Registration Fee Pd: \_\_\_ Cash\_\_\_ Check #\_\_\_ Amount\_\_\_ Transfer Grant\_\_\_