



**PREK** \_\_\_\_\_

**K-8<sup>TH</sup>** \_\_\_\_\_

**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 year Old \_\_\_ 4 Year Old Half-Day \_\_\_ 4 Year Old Full Day

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 \_\_\_\_\_

\*\*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\_\_\_