

# Good Shepherd Catholic School Registration Form

Office Use Only:	
Fee Paid: _____	Date: _____
Check # _____	Cash _____
SN: _____	PN: _____

Student's Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_  
Month Day Year City State

Address: \_\_\_\_\_  
Number & Street City Zip

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Religion: Catholic (  ) Other (Please Specify) \_\_\_\_\_ Parish \_\_\_\_\_

Baptism Date \_\_\_\_\_ Church \_\_\_\_\_ Address \_\_\_\_\_ City & State \_\_\_\_\_

First Communion Date \_\_\_\_\_ Church \_\_\_\_\_ City & State \_\_\_\_\_ Penance Date \_\_\_\_\_

Confirmation Date \_\_\_\_\_ Church \_\_\_\_\_ City & State \_\_\_\_\_

School Previously Attended \_\_\_\_\_ Grade Entering \_\_\_\_\_

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\_\_\_\_\_  
Father's Name (Last) First (Yes)\_\_\_\_(No)\_\_\_\_  
US Citizen Religion

\_\_\_\_\_  
Occupation Employer Work Phone

\_\_\_\_\_  
Mother's Maiden Name First (Yes)\_\_\_\_(No)\_\_\_\_  
US Citizen Religion

\_\_\_\_\_  
Occupation Employer Work Phone

Home Conditions: Traditional (lives with both parents) (  ) Parents Divorced (  ) Parents Separated (  )  
Mother Remarried (  ) Father Remarried (  ) Father Deceased (  ) Mother Deceased (  )

\_\_\_\_\_  
Step Parent's Last Name First (Yes)\_\_\_\_(No)\_\_\_\_  
US Citizen Religion

\_\_\_\_\_  
Occupation Employer Work Phone

\_\_\_\_\_  
Name of person with whom pupil lives if other than above Relationship

(Please complete back page)

## Good Shepherd Catholic School Statistical Report

Parents were married in the Catholic Church \_\_\_\_\_.  
Yes/No

### Listing of other children enrolled at Good Shepherd Catholic School

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Grade

### Check ethnic origin of child

Asian ( )    Caucasian ( )    Filipino ( )    Hispanic ( )    Multi-racial ( )

African-American ( )    American Indian ( )    Native Hawaiian/Pacific Islander ( )