

HOLY FAMILY CATHOLIC SCHOOL

REGISTRATION FORM 2010-2011 SCHOOL YEAR

<u>STUDENT'S NAME</u>	<u>BIRTHDATE</u>	<u>GRADE</u> Next Year	<u>NEW TO</u> HFCS
_____	_____	_____	Yes/No
_____	_____	_____	Yes/No
_____	_____	_____	Yes/No
_____	_____	_____	Yes/No

_____ We do not plan on returning to Holy Family Catholic School.

PARENT(S) _____

ADDRESS _____

CITY, STATE, ZIP _____

TELEPHONE NUMBERS _____
HOME WORK

Registered members of Holy Family Catholic Church? YES _____ NO _____
Registered members of _____ Catholic Church.

NOTE: REGISTRATION FEE FOR OLDEST/ONLY CHILD MUST ACCOMPANY THIS FORM. SIBLING REGISTRATION MAY BE PAID IN SUBSEQUENT MONTHS. (2ND CHILD IN MARCH, 3RD CHILD IN APRIL, 4TH CHILD IN MAY)

\$225.00 – Oldest and only child
\$200.00 – All other siblings

FOR OFFICE USE ONLY

<u>TUITION CODE:</u> HF 3K 4K 1 2 3 4	OP 3K 4K 1 2 3 4
<u>REGISTRATION FEE</u> \$ _____ AMT. PD \$ _____	CHECK # _____
	CHECK # _____
	CHECK # _____
	CHECK # _____