

St. Dominic School
Registration Form for New Students

There is a \$30 registration fee which must accompany this form to be considered registered.

Child's Name: _____ **M** _____ **F** _____
Last, First, Middle

Address: _____
Street, City, State, Zip

Email Addresses: _____

Home Phone: (____) _____ **Birth Date and Year:** _____

Place of Birth: _____
Street, City, State, Zip

Grade Last Attended: _____ **School:** _____
Name, City, State

Grade Entering: _____ **Preschool 3-4 year old** _____ **4-5 year old** _____
For preschool details, see Preschool "Frequently Asked Questions" Page

Baptism: _____ **Church:** _____
Month, Day, Year *City, State*

First Communion: _____ **Church:** _____ **First Confession:** Y / N
Month, Day, Year *City, State*

Father's Information:

Last name, first name

Mother's Information:

Last name, first name, maiden name

Religion: _____

Religion: _____

Occupation: _____

Occupation: _____

Business Ph#: () _____

Business Ph #: () _____

Cell Ph #: () _____

Cell Ph #: () _____

Brothers / Sisters: # _____ **Older** # _____ **Younger**

St. Dominic Parishioner: Y / N **If No, church affiliation:** _____

Health Concerns, if any, for your child: _____

Legal Guardian: _____ **Both Parents**
_____ **Other (please provide legal documentation)**