

PreK -7<sup>th</sup> Grade

ASCENSION OF OUR LORD SCHOOL  
NEW STUDENT REGISTRATION

Grade Entering \_\_\_\_\_  
2 yr old\_ 3 yr old \_ 4 yr old \_

PLEASE PRINT!

2017 - 2018

STUDENT NAME: \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
(Last) (First) (Full Middle Name)

ADDRESS \_\_\_\_\_  
(Street & PO Box) (City) (Zip Code)

EMAIL ADDRESS(ES) \_\_\_\_\_

Place of Birth (City & State) \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Date of Birth \_\_\_\_\_ Religion \_\_\_\_\_ Social Security # \_\_\_\_\_

African-American \_\_\_\_\_ Asian \_\_\_\_\_ Caucasian \_\_\_\_\_ Hispanic \_\_\_\_\_ Other \_\_\_\_\_

Date of Baptism \_\_\_\_\_ Church \_\_\_\_\_ Place \_\_\_\_\_

Date of Communion \_\_\_\_\_ Church \_\_\_\_\_ Place \_\_\_\_\_

Name & Address of Previous School in 2016 - 2017 \_\_\_\_\_

List any health problems: \_\_\_\_\_

Natural Father **ONLY**

\_\_\_\_\_ Deceased? \_\_\_\_\_ Religion \_\_\_\_\_  
(Last) (First) (Initial)

Occupation \_\_\_\_\_ Business Phone \_\_\_\_\_ Education (Years Completed) \_\_\_\_\_

Name & Address of Employer \_\_\_\_\_

Natural Mother **ONLY**

\_\_\_\_\_ Deceased? \_\_\_\_\_ Religion \_\_\_\_\_  
(Last) (First) (Initial)

Occupation \_\_\_\_\_ Business Phone \_\_\_\_\_ Education (Years Completed) \_\_\_\_\_

Name & Address of Employer \_\_\_\_\_

Natural Parents Separated? \_\_\_\_\_ If yes, who does the child reside with? \_\_\_\_\_

Name of Step Parent/Guardian \_\_\_\_\_ Relationship \_\_\_\_\_  
(Last) (First) (Initial)

Religion \_\_\_\_\_ Occupation \_\_\_\_\_ Bus. Phone \_\_\_\_\_

Name & Address of Employer \_\_\_\_\_

Please circle the grade level of **siblings** enrolled at Ascension of Our Lord School for the 2017 - 2018 term.  
2 yr old Pre-K (3 yr) Pre-K (4 yr) K 1 2 3 4 5 6 7 8

Church Parish \_\_\_\_\_ Envelope # \_\_\_\_\_ Pastoral Approval \_\_\_\_\_

I have read and concur with the terms as stated on the Financial Policies pages for the 2017 - 2018 school year.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

\* \* \* \* \*

Please Check One: (Financial Option Chosen)  
 Pre-Paid \_\_\_\_\_ Monthly \_\_\_\_\_  
 PreK 5-Day \_\_\_\_\_  
 PreK 3-Day \_\_\_\_\_  
 2 Yr Old 5-Day \_\_\_\_\_  
 2Yr Old 3-Day \_\_\_\_\_

\*\*\*\*\* For Office Use Only\*\*\*\*\*

<b>Records Verified</b>	<b>Registration Fee</b>
Birth Certificate _____	1 child _____ 2 children _____
Baptism Certificate _____	3 children _____ 4 children _____
Immunization _____	Registration taken by _____
SS Card _____	Check No. _____ Cash _____
Court Custody _____	Date _____
Stewardship Form _____	Tuition Rate P NP NC V
Smart Tuition _____	