

Office Use Only:
Cash _____ Check# _____

2008/2009

3YR. OLD _____ AM
CIRCLE ONE: _____ PM

4YR. OLD _____ AM
_____ PM

MARY, QUEEN OF HEAVEN SCHOOL
NEW STUDENT REGISTRATION FORM PRE-SCHOOL

A SEPARATE REGISTRATION FORM MUST BE FILLED OUT FOR EACH CHILD

STUDENT NAME _____ DATE _____ AM _____
Last First Middle PM _____

ADDRESS _____
Street City PH _____
State Zip County

SEX: M F RACE RELIGION PREV. SCHOOL

CHILD'S PLACE OF BIRTH _____ DOB _____ SS# _____
City State

CURRENT FAMILY DATA

MOTHER

FATHER

NAME _____
Last First Maiden Last First

MARITAL STATUS _____

HOME ADDRESS _____

EMAIL _____

PH: NOS. _____
Work Home Work Home

CELL# _____ CELL# _____

BIRTH PLACE _____ DOB _____
City State City State

RELIGION _____

PLACE OF EMPLOYMENT _____

OCCUPATION _____

EDUCATION _____

ARE YOU A MQH PARISHIONER _____ PARISH ATTENDING _____

STUDENT LIVES WITH: BOTH PARENTS _____ MOTHER _____ FATHER _____ GUARDIAN _____ OTHER _____

STUDENT PLACE OF BAPTISM _____ DATE _____

STUDENT 1ST RECONCILIATION & COMMUNION _____
Church & Location Full Date
Church & Location Full Date

REGISTRATION FEE MUST BE PAID WITH REGISTRATION & IS NON-REFUNDABLE - \$125.00 PER CHILD

NO OF CHILDREN OLDER _____ NO. OF CHILDREN YOUNGER _____ AMOUNT ENCLOSED _____

SEE CHECK LIST FOR ALL MANDATORY RECORDS IN ORDER FOR YOUR CHILD TO ATTEND MQH

PARENTS SIGNATURE DATE