

MATER DEI CATHOLIC SCHOOL



FAMILY REGISTRATION

School Year: \_\_\_\_\_

Parents/Gaurdians: \_\_\_\_\_

Students Enrolling: \_\_\_\_\_  
 \_\_\_\_\_

Race: \_\_\_\_\_

Person(s) childre(ren) live with: \_\_\_\_\_

Home Address, City and Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Home E-mail Address: \_\_\_\_\_

Parents/Guardians: \_\_\_\_\_ Martial Status: \_\_\_\_\_

Father		Mother
	Employer	
	Postion	
	Work Phone	
	Work E-Mail	
	Cell Phone	
	Religion	
	Maiden Name	

If a step parent is present please give their name: \_\_\_\_\_

	To School	From School
Transportation		

**Over**

Permission Requested: My child(ren) has/have permission to have their pictures taken for publicity purposes:  
 (Circle one) yes      no

Public School: Our home is located in:    Public School District: \_\_\_\_\_

The Elementary School is: \_\_\_\_\_

The Middle School is: \_\_\_\_\_

If you have more than one child enrolled, who should bring newsletters and other information home?

\_\_\_\_\_  
 Signature of Parent(s): \_\_\_\_\_