

OUR LADY OF THE ASSUMPTION SCHOOL
REGISTRATION - GRADES 1-8

Grade Applying For:: _____

Last Name: _____

Date: _____

First Name: _____

Birthdate: _____

Race: _____

Birthplace: _____

Religion: _____ Parish Name & Location: _____

Date of Baptism: _____ Place of Baptism: _____

Date of First Holy Communion: _____

School Currently Attending: _____

Is your child currently on an IEP or 504? _____

Does your child require services? _____ If so, please explain, in detail, on the back of this application.

Student's Home Address:

Street: _____ City/Zip: _____

Home Phone: (____) _____ Lives With: () Mother () Father () Both
() Grandparent () Other

Brother/Sister

#1 _____ Grade: _____

#2 _____ Grade: _____

#3 _____ Grade: _____

Parent Information

Mother

Father

Last Name: _____

First Name: _____

Maiden Name: _____

Place of Birth: _____

Religion: _____

Street: _____

City/Zip: _____

Occupation: _____

Home Phone: (____) _____

(____) _____

Work Phone: (____) _____

(____) _____

Cell Phone: (____) _____

(____) _____

E-Mail Address: _____

Parent Signature: _____

