ST. CYPRIAN FAMILY REGISTRATION FORM 2011-12

Please complete this form listing the name of each child who will be attending St. Cyprian for the new school year. This registration should include both pre-kindergarten and kindergarten for the fall term.

Please return the form with the fee of $75.00 (non-refundable) *per child*.

PARENTS ARE YOU ST. CYPRIAN ALUM? YEAR? _____ _____

_____ _____ _____

Last Name **Mother's Name** **Father's Name**

_____ _____ _____

Address **City** **Zip**

_____ _____ _____

Home Phone **Father's Work Phone** **Mother's Work Phone**

~~~~~~~~~~~~~IMPORTANT~~~~~~~~~~~

If your child were enrolled in the public school, which school would she/he attend _____

# of Public School District in which you live _____ *Do you live more than 1 1/2 miles from St. Cyprian* ___ *YES* ___*NO*

Registration is not complete unless all new registrants submit a birth and baptismal certificate as well as all updated medical records before *June 1, 2011.*

STUDENT (**oldest first**)	BIRTHDATE	GRADE - **SEPTEMBER, 2011**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PLEASE CHECK REGISTRATION: ☐ In Parish ☐ Out of Parish _____ Parish Name

Ethnicity/Racial Background _____

Parents not registered at St. Cyprian Church pay an additional charge for the 2011-2012 school year.

TOTAL AMOUNT PAID $_____ CASH ___ CHECK # _____ DATE _____

(office use only)