



## 2014-2015 RE-ENROLLMENT FORM

FAMILY NAME: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade during 2014-2015 \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade during 2014-2015 \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade during 2014-2015 \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade during 2014-2015 \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Preferred Email: \_\_\_\_\_

I give Saints Peter and Paul School permission to publish this email address in the School Directory

\*Only 1 email address per family will be published.

School District in which child(ren) reside(s): \_\_\_\_\_

### PARENT INFORMATION

Mother's Name: \_\_\_\_\_  
(First) (Middle) (Maiden) (Last)

Address (if different from child's): \_\_\_\_\_

Employer's Information: \_\_\_\_\_  
(Employer Name) (Occupation/Title)

Phone \_\_\_\_\_  
(Home) (Cell) (Business)

Father's Name: \_\_\_\_\_  
(First) (Middle) (Last)

Address (if different from child's): \_\_\_\_\_

Employer's Information: \_\_\_\_\_  
(Employer Name) (Occupation/Title)

Phone \_\_\_\_\_  
(Home) (Cell) (Business)

Student(s) resides with:  Both Parents  Mother  Father  Other \_\_\_\_\_

Parent's Marital Status:  Married  Separated  Divorced  Widowed  Single

If applicable, please provide stepparent information: \_\_\_\_\_

(Please complete both sides)

EMERGENCY CONTACT (other than parent/guardian): \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

I give permission for the following person(s) to pick up my child(ren) at dismissal:

Name	Number	Relationship
------	--------	--------------

We are registered members of Saints Peter and Paul Parish:  Yes  No

If Catholic, but not members of SSPP, what is your Parish? \_\_\_\_\_

*\*Families who are not members of Saints Peter and Paul Parish pay the "Out of Parish" tuition rate.*

All families who are members of Saints Peter and Paul Parish receive a tuition contribution from Saints Peter and Paul Church. These families are required to contribute a minimum of \$15 weekly per family to the Sunday Collection (summer included).

**RE-ENROLLMENT FEE**

Rec'd by Jan. 24 \$50 fee/child

Rec'd after Jan. 24 \$100 fee/child

(Siblings who are new in 2014-2015 are considered **New Students**)

**New Students Must Submit:**

- New Student Registration Form (available online & in the Main Office)
- \$100 New Student Registration Fee
- Copy of Baptismal Certificate
- Copy of Birth Certificate

OFFICE USE ONLY
# of students to re-enroll _____
Amount \$ _____
Check # _____
Date Rec. _____
Initialed By _____

Parent's Signature(s) (Mother) (Father) (Date)

**ADVANCEMENT OFFICE INFORMATION**

Please print your name as you would like to be addressed on school mailings:

So that we may invite your child's grandparents to school events, please write their names and addresses here:

Are there additional names and addresses you would like added to the school mailing list?

(Name) (Address)

(Email) (Relationship)

Please note your talents, hobbies or resources at home or at work that you would share with Saints Peter and Paul School. \_\_\_\_\_