

# 2009-2010 School Year IN-HOUSE REGISTRATION

January 20<sup>th</sup> to January 23<sup>rd</sup>, 2009

Child's Name \_\_\_\_\_ Grade in September \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade in September \_\_\_\_\_

Child's Name \_\_\_\_\_ Grade in September \_\_\_\_\_

(Please include any Pre-Kindergarten children and indicate either three- or four-year old program.  
Children being enrolled in our Pre-K 3 Program must be 3 years of age by October 1<sup>st</sup>.)

Address \_\_\_\_\_  
Street Town State Zip

Home Number \_\_\_\_\_

Parish \_\_\_\_\_ Town \_\_\_\_\_

Father's Name _____	Mother's Name _____
Occupation _____	Occupation _____
Business Phone _____	Business Phone _____
Cell Phone _____	Cell Phone _____
E-Mail Address _____	E-Mail Address _____

Guardian's Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Business Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-Mail Address \_\_\_\_\_

1. A non-refundable registration fee of \$100 per family must accompany this form.
2. In the event that a grade is full, you may ask to be placed on a waiting list, which still requires submitting this form with the registration fee.
3. Acceptance of this fee by Holy Family Catholic Academy does not guarantee enrollment.

Name of Parent/Guardian (Please Print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_