

St. Mary's School
Parent/Student Information Sheet

Please Print ALL Information

Father/Male Guardian:

Last Name _____ First Name _____

St. Mary's Church Parishioner: Yes No

Street Address: _____

City, State, Zip _____

Home Phone #: _____

Cell Phone #: _____ Carrier: _____

Place of Employment: _____

Work Phone #: _____

Family E-mail Address: _____

(e-mail is required, it is our primary means of correspondence)

Mother/Legal Guardian

Last Name _____ First Name _____

St. Mary's Church Parishioner: Yes No

Street Address: _____

City, State, Zip _____

Home Phone #: _____

Cell Phone #: _____ Carrier: _____

Place of Employment: _____

Work Phone #: _____

Family E-mail Address: _____

(e-mail is required, it is our primary means of correspondence)

- Student lives with:** Mother and Father Mother Father
 Father & Stepmother Mother & Stepfather Guardian(s)

Name (as listed on birth certificate) and grades of students attending St. Mary's School.

First	Middle	Last	Nickname	Grade	Date of Birth