



# SAINT GEORGE INDEPENDENT CATHOLIC SCHOOL NEW STUDENT REGISTRATION 2021-2022

**OFFICE USE ONLY**

Registration Fee \_\_\_\_\_  
Received By \_\_\_\_\_  
Payment Received \_\_\_\_\_

Application For Grade:	PK <input type="checkbox"/>	K <input type="checkbox"/>	1 <sup>st</sup> <input type="checkbox"/>	2 <sup>nd</sup> <input type="checkbox"/>	3 <sup>rd</sup> <input type="checkbox"/>	4 <sup>th</sup> <input type="checkbox"/>	5 <sup>th</sup> <input type="checkbox"/>	6 <sup>th</sup> <input type="checkbox"/>	7 <sup>th</sup> <input type="checkbox"/>	8 <sup>th</sup> <input type="checkbox"/>
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**TO BE COMPLETED BY PARENT/GUARDIAN (PLEASE PRINT)**

**Date** \_\_\_\_\_

Student Name \_\_\_\_\_

LAST NAME                                      FIRST NAME                                      MIDDLE NAME

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

NUMBER AND STREET                                      CITY                                      STATE                                      ZIP CODE

Primary Phone: \_\_\_\_\_ Gender:  Male  Female

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Soc. Security # \_\_\_\_\_

MONTH / DAY / YEAR                                      CITY                                      STATE

Religion: \_\_\_\_\_ Church where you are registered: \_\_\_\_\_

Student currently attends: \_\_\_\_\_ Current Grade: \_\_\_\_\_

<input type="checkbox"/> <b>Father</b> <input type="checkbox"/> <b>Stepfather</b> <input type="checkbox"/> <b>Guardian</b> <i>(please check one)</i>  <p style="text-align: center;">LAST                                      FIRST                                      MIDDLE</p> <p>Address: _____ (IF DIFFERENT FROM ABOVE)</p> <hr/> <p style="text-align: center;">CITY                                      STATE                                      ZIP</p> <p>Phone: _____ Cell: _____</p> <p>EMAIL: _____</p> <p>Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased</p> <p>Place of Birth: _____</p> <p>Religion: _____ U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Occupation: _____</p> <p>Employer: _____</p> <p>Work Phone: _____</p> <p>Email: _____</p>	<input type="checkbox"/> <b>Mother</b> <input type="checkbox"/> <b>Stepmother</b> <input type="checkbox"/> <b>Guardian</b> <i>(please check one)</i>  <p style="text-align: center;">LAST                                      FIRST                                      MIDDLE</p> <p>Address: _____ (IF DIFFERENT FROM ABOVE)</p> <hr/> <p style="text-align: center;">CITY                                      STATE                                      ZIP</p> <p>Phone: _____ Cell: _____</p> <p>EMAIL: _____</p> <p>Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased</p> <p>Place of Birth: _____</p> <p>Religion: _____ U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Occupation: _____</p> <p>Employer: _____</p> <p>Work Phone: _____</p> <p>Email: _____</p>
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2700 E. VENANGO STREET, PHILADELPHIA, PA 19134 215-634-8803

**Find us on Facebook: "Saint George Catholic  
Elementary School" and visit our website at**

<http://www.stgeorgecatholic.org>

**TO BE COMPLETED BY PARENT/GUARDIAN (PLEASE PRINT)**

If parents are separated or divorced, who has legal custody of the student? \_\_\_\_\_

With whom does the student live? \_\_\_\_\_ Relationship: \_\_\_\_\_

Please list address (only if different from primary address listed):

NUMBER AND STREET	CITY	STATE	ZIP CODE
Baptism: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list Parish/Date: _____	____/____/____	____/____/____
Penance: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list Parish/Date: _____	____/____/____	____/____/____
Communion: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list Parish/Date: _____	____/____/____	____/____/____
Confirmation: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list Parish/Date: _____	____/____/____	____/____/____

Are you aware of any learning, physical or emotional difficulties your child is experiencing? Yes No

**\*\*PLEASE NOTE THAT IN THE CASE OF CUSTODY CONCERNS, PROPER PAPERWORK MUST BE ON FILE IN THE OFFICE\*\***

Who is responsible for all tuition and fees? \_\_\_\_\_

Has the student received any of the following sacraments in the Catholic Church?

If yes, please explain: \_\_\_\_\_

Is your child in a special learning program or on a behavioral plan at his/her current school? Yes No

Has your child ever had counseling? Yes No If yes, please explain: \_\_\_\_\_

Are there any other details about your child that are important for the school to know, including repeated grades, attendance issues, or recent changes that may affect your child's school experience? Yes No

If yes, please explain: \_\_\_\_\_

My signature below confirms that I have accurately represented my family and child on this application. In addition, it acknowledges that I will accept and support the school's policies, procedures, mission and Catholic identity should my child attend the school.

**SIGNATURE OF PARENT/GUARDIAN** \_\_\_\_\_ **DATE** \_\_\_\_\_

**To complete your application to Saint George Catholic Elementary School, please arrange to submit:**

- A copy of your child's birth certificate
- A copy of your child's Social Security Card
- Up-to-date medical form with immunizations
- A copy of child's Baptismal Certificate (if applicable)
- Letter of Release from Pastor (if applicable)
- A copy of latest report card
- A copy of any testing/modifications/IEP (if applicable)
- A copy of custody/court papers (if applicable)
- A \$125 registration fee attached to this application

**Thank You for Choosing Saint George Independent School**