

St. Cornelius Catholic School
160 Ridge Road
Chadds Ford, PA 19317

**NEW FAMILY REGISTRATION FORM
2020-2021**

Registration Fee: \$100 per child

Please Print

Last Name of Family: _____ Last Name of Child(ren): _____

Father's Name: _____ Mother's Name: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____

Public School District of Residence: _____

County of Residence: _____

Father's Email Address: _____ Mother's Email Address: _____

Father's Work Phone: _____ Father's Cell Phone: _____

Mother's Work Phone: _____ Mother's Cell Phone: _____

Primary Phone Number for Option C: _____

Primary Email Address for Option C: _____

If Catholic, please list Parish of registration: _____

Custody Information

- Married
- Separated
- Divorced
- Mother Deceased
- Father Deceased

Who has Primary Physical Custody:

- Mother
- Father
- Guardian Full Name: _____

If Separated or Divorced, a copy of Custody Agreement is required.

