

STUDENT INFORMATION SHEET

**\*PLEASE COMPLETE ITEMS MARKED**

**TEACHER'S NAME:** \_\_\_\_\_

**\*STUDENT'S NAME:** \_\_\_\_\_ **\*BIRTHDAY:** \_\_\_\_\_

**\*PARENT'S NAMES:** \_\_\_\_\_

**\*STUDENT'S NICKNAME IF APPLICABLE:** \_\_\_\_\_

**\*MAILING ADDRESS (STREET, CITY AND ZIP CODE):**

\_\_\_\_\_

**\*PHONE (HOUSE & CELL):** \_\_\_\_\_

**\*AGE/DAYS PER WEEK:** \_\_\_\_\_ **\*CHURCH PARISH:** \_\_\_\_\_

\_\_\_\_\_ **BIRTH CERTIFICATE** \_\_\_\_\_ **IMMUNIZATION RECORDS**

	AMOUNT	CHECK NUMBER	DATE PAID	COMPUTER
Registration Fee	_____	_____	_____	_____
Materials Fee	_____	_____	_____	_____
Building Use Fee	_____	_____	_____	_____
August Tuition	_____	_____	_____	_____
September Tuition	_____	_____	_____	_____
October Tuition	_____	_____	_____	_____
November Tuition	_____	_____	_____	_____
December Tuition	_____	_____	_____	_____
January Tuition	_____	_____	_____	_____
February Tuition	_____	_____	_____	_____
March Tuition	_____	_____	_____	_____
April tuition	_____	_____	_____	_____
May Tuition	_____	_____	_____	_____