St. Mary Our Mother School - Preschool - 3 Year Old Diocese of Rochester

Diocese of Rochester
Department of Catholic Schools
New Student Registration Form

Date of Registration	M/W/F f	full day	M-F ½ d	lay M-	F full day	
**CHILD MUST BE TOILET	TRAINED - NO PU	LL-UPS **	*			
Please Print						
Student Name				Male	Female	
Last Name	First N	Vame	MI	TT 1'	. 1 37	NT
Address	Home Phor Cell Phone (Unlis	sted Yes	No
Street		,	where stude	nt resides		
City/Town State Zip	7					
Birthdate/ Bi	irthplace					
CHILD MUST BE 3 YEARS OF AGE BY DEC	CEMBER 1 TO REGISTER F	OR PROGRAM	I			
Please Check ♥□						
	Asian	or Native Pa	cific/		Multi-	
Alaskan Native African Am	nerican Other I	Pacific Island	ler	White	_Racial	
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and address.					_	Zip
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 $\begin{tabular}{ll} FAMILY\ INFORMATION \\ (complete the information for both mother , father and/or legal\ guardian) \\ \end{tabular}$

Name: First Last M I Address: Street City/Town State/Zip Birthplace Birthdate Religion Citizenship (Country) Education: Last Grade Completed in School Occupation Place of Business Address Business Phone Cell Phone Other Language(s) spoken in home CHECK ALL THAT APPLY: Married Widowed (give date) Divorced Separated Remarried Single	AL GUARDIAN	LEGAL GU	MOTHER (Maiden Name)		FATHER	
M I						Name: First
M I						Last
Address: Street City/Town State/Zip Birthplace Birthdate Religion Citizenship (Country) Education: Last Grade Completed in School Occupation Place of Business Address Business Phone Cell Phone Other Language(s) spoken in home CHECK ALL THAT APPLY: Married Widowed (give date) Divorced Separated Remarried Single						
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Cell Phone Other Language(s) spoken in home CHECK ALL THAT APPLY: Married Widowed (give date) Divorced Separated Remarried Single						Address
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Spoken in home CHECK ALL THAT APPLY: Married Widowed (give date) Divorced Separated Remarried Single						Cell Phone
Married Widowed (give date) Divorced Separated Remarried Single						
Widowed (give date) Divorced Separated Remarried Single					APPLY:	CHECK ALL THAT A
						Widowed (give date) Divorced Separated Remarried
Other children in the family: Name(s): Last First Date of Birth School or C	Other Info.	School or Other I	Date of Birth	First		