



HOLY ROSARY SCHOOL

Intent to Register

*Please complete this form if you are a current Holy Rosary School family that have a **new** student to enroll for the 2015 - 2016 school year.*

Return to the main office by Friday, December 19, 2014.

☐ 3/4's Preschool

☐ Pre-K

☐ Kindergarten

☐ 1st – 8th

STUDENT INFORMATION

Last Name	First Name	Middle Initial	Preferred Name	Female Male (please circle)
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Home Address	City	State	Zip Code	Home Phone
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Date of Birth* _____ Birthplace _____

*Kindergarten applicants must have reached their fifth birthday on or before August 31st. Preschool 3/4 applicants must be the age of three on or before August 31st. Pre-Kindergarten applicants must be the age of 4 on or before August 31st.

Mother's Name: _____ Phone: _____

Father's Name: _____ Phone: _____

Primary Email Address: _____

Siblings currently attending Holy Rosary School

_____ Grade: _____

_____ Grade: _____

_____ Grade: _____

_____ Grade: _____

Applications are currently available online and in the main office. Application and fee must be completed and returned to the main office by Friday, January 30, 2015.