



**Registration for Returning Families**  
2025-2026

Family Name: \_\_\_\_\_

| Child(ren)'s Name | Date of Birth | Grade in 2025-2026 |
|-------------------|---------------|--------------------|
|                   |               |                    |
|                   |               |                    |
|                   |               |                    |
|                   |               |                    |

Please include the \$100.00 per family registration fee with the return of your registration form.

**Please complete the following so that we may verify or update our records.**

Parent/Guardian Information

| Name | Cell Phone | Email Adress |
|------|------------|--------------|
|      |            |              |
|      |            |              |

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

If the student has two households, please list the parent name/address of the additional household below:

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home School District \_\_\_\_\_

Religion \_\_\_\_\_ Parish Affiliation \_\_\_\_\_

Check where appropriate:

Parents are together \_\_\_\_\_ Parents are divorced \_\_\_\_\_ Parents are separated \_\_\_\_\_

Student ethnicity:

American Indian or Alaska Native \_\_\_\_\_ Black or African American \_\_\_\_\_ Asian \_\_\_\_\_

Hispanic or Latino \_\_\_\_\_ White \_\_\_\_\_ Multi-racial \_\_\_\_\_ - please detail \_\_\_\_\_

Emergency Contact Information

| Name/Relationship | Cell Phone | Has my permission to pick up my child(ren) Y/N |
|-------------------|------------|--|
|                   |            |  |
|                   |            |  |