Blessed Sacrament School

Pre-Registration Form

Date_____

Student's Name_____
Last First M.I.

Circle Grade Choice: K 1 2 3 4 5 6 7 8

Entrance for school year: 20_____-20_____ Child's birthdate_____

Home address_____
Street City Zip Code

Telephone: Home_____ Work (M)_____ Work (F)_____

Blessed Sacrament Church Parishioner: Yes_____ Since_____ No_____

If no, current church affiliation_____

Members for_____ years. Pastor's name_____

If you joined Blessed Sacrament Parish within the past year, what was your former parish?_____

Other children attending Blessed Sacrament School_____

Name of school child now attending_____

Why is child leaving present school?_____

Has your child any special needs we should plan for? (For example, learning disabilities, medical or psychological needs, special abilities)

_____

Why do you want your child to attend Blessed Sacrament School?_____

_____

How did you learn about the school?_____

Do you intend for your child to stay at the school through the 8th grade?
Yes_____ No_____

Parent Name_____Signature_____

Please complete this form and return with a copy of the child's birth certificate and a $15.00 non-refundable application fee.

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