



NEW Student Registration

St. Mary School, Hyde Park

2845 Erie Avenue
Cincinnati, OH 45208
Tel: 513-321-0703 Fax: 513-533-5517
www.smsbp.com

Date: _____

Chk#: _____

IP OP

SIB

For Office use

Information about Child

Registering for Grade _____
Kindergarten Full _____ Half Day _____
School Year _____

CHILDS NAME (first) _____ (M) _____ (Last) _____

CHILD'S ADDRESS _____ Home Phone # _____

City _____ County _____ State _____ Zip _____

BIRTHDATE ____/____/____ BIRTHPLACE _____ Sex _____ SOC. SEC. # _____

Previous School (Name & Address) _____

Public School of Residence (i.e. Kilgour, J.P. Parker Elementary) _____

Child's Ethnic Background:

- | | | |
|--|--|---|
| <input type="checkbox"/> Native American | <input type="checkbox"/> Native Alaskan | <input type="checkbox"/> African American |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Pacific | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> Caucasian | RELIGION: <input type="checkbox"/> Catholic Other _____ | |

DUE at Registration

- Registration Fee:
 Kindergarten: \$275
 Grades 1-8: \$ 75
- Copy of Birth Certificate
- Copy of most recent report card for grades 1-8

Legal Parents (indicate all that apply):

- | | | |
|--|--|---|
| <input type="checkbox"/> Both parents living at home | <input type="checkbox"/> Guardian | <input type="checkbox"/> Foster Parents |
| <input type="checkbox"/> Mother only | <input type="checkbox"/> Stepfather only | <input type="checkbox"/> Adopted |
| <input type="checkbox"/> Father only | <input type="checkbox"/> Mother and Stepfather | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Grandparents | <input type="checkbox"/> Stepmother only | |
| <input type="checkbox"/> Father and Stepmother | <input type="checkbox"/> Joint Custody | |

Child resides with: _____

Father

FATHER'S NAME _____ (MI) _____ (Last) _____

ADDRESS (If different than child's) _____

Ethnicity _____

(City) _____ (State) _____ (Zip) _____

Home phone: _____ Work phone: _____ Cell phone: _____

E-Mail Address _____ Soc. Sec. # _____

BIRTHDATE: ____/____/____ BIRTHPLACE (City/State) _____

RELIGION: Catholic Other _____ Graduate of St. Mary School? No Yes (Year) _____

EDUCATION: _____ OCCUPATION: _____

EMPLOYMENT ADDRESS: _____

(City) _____ (State) _____ (Zip) _____

- Living Deceased Marital Status _____ U.S. Citizen Yes No

Mother

MOTHER'S NAME _____ (MI) _____ (Last) _____
 Mother's Maiden Name _____ Ethnicity _____
 ADDRESS (If different than child's) _____
 (City) _____ (State) _____ (Zip) _____
 Home phone: _____ Work phone: _____ Cell phone: _____
 E-Mail Address _____ Soc. Sec. # _____
 BIRTHDATE: ____/____/____ BIRTHPLACE (City/State) _____
 RELIGION: Catholic Other _____ Graduate of St. Mary School? No Yes (Year) _____
 EDUCATION: _____ OCCUPATION: _____
 EMPLOYMENT ADDRESS: _____
 (City) _____ (State) _____ (Zip) _____
 Living Deceased Marital Status _____ U.S. Citizen Yes No

Religious Background

PARISH AFFILIATION

Registered in St. Mary Parish Registration Date _____

Registered in another Catholic Parish →
 Parish Name: _____
 Location: (City/State) _____
 Pastor: _____

Not registered in any Catholic Parish

Member of other faith congregation _____

SACRAMENTS RECEIVED BY CHILD

	BAPTISM	FIRST COMMUNION	RECONCILIATION	CONFIRMATION
Date: _____				
Church: _____				
City/State: _____				

Family Information

This child would be the only child in our family attending St. Mary School at this time.
 This child is our youngest child attending St. Mary School at this time.
 This child will be the oldest child in our family attending St. Mary School at this time.
 This child is our middle child attending St. Mary School at this time.

Siblings: (Names, ages, school and grade) _____

If applicable: Stepmother (name) _____ Stepfather (name) _____