



SAINT GEORGE CATHOLIC ELEMENTARY SCHOOL RE-REGISTRATION FORM 2018-2019

OFFICE USE ONLY	
Registration Fee	_____
Received By	_____
Payment Type	_____
Date	_____

Application for Grade: PK K 1 2 3 4 5 6 7 8

Date _____

TO BE COMPLETED BY PARENT/GUARDIAN (PLEASE PRINT)

Student Name _____

LAST NAME
FIRST NAME
MIDDLE NAME

Primary Address: _____

NUMBER AND STREET
CITY
STATE
ZIP CODE

Primary Phone: _____ Gender: Male Female

Date of Birth: _____ Place of Birth: _____ Soc. Security # _____

MONTH / DAY / YEAR
CITY
STATE

Religion: _____ Church where you are registered: _____

Siblings in the School (Names and Grades) _____

<input type="checkbox"/> Father <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian <i>(please check one)</i>	<input type="checkbox"/> Mother <input type="checkbox"/> Stepmother <input type="checkbox"/> Guardian <i>(please check one)</i>
LAST FIRST MIDDLE	LAST FIRST MIDDLE
Address: _____ (IF DIFFERENT FROM ABOVE)	Address: _____ (IF DIFFERENT FROM ABOVE)
CITY STATE ZIP	CITY STATE ZIP
Phone: _____ Cell: _____	Phone: _____ Cell: _____
EMAIL: _____	EMAIL: _____
Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased	Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Deceased
Place of Birth: _____	Place of Birth: _____
Religion: _____ U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No	Religion: _____ U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
Occupation: _____	Occupation: _____
Employer: _____	Employer: _____
Work Phone: _____	Work Phone: _____
Email: _____	Email: _____

TO BE COMPLETED BY PARENT/GUARDIAN (PLEASE PRINT)

If parents are separated or divorced, who has legal custody of the student? _____

With whom does the student live? _____ Relationship: _____

Please list address (only if different from primary address listed):

NUMBER AND STREET

CITY

STATE

ZIP CODE

****PLEASE NOTE THAT IN THE CASE OF CUSTODY CONCERNS, PROPER PAPERWORK MUST BE ON FILE IN THE OFFICE****

Who is responsible for all tuition and fees? _____

Has the student received any of the following sacraments in the Catholic Church?

Baptism: Yes No If yes, list Parish/Date: _____ / ____ / ____

Penance: Yes No If yes, list Parish/Date: _____ / ____ / ____

Communion: Yes No If yes, list Parish/Date: _____ / ____ / ____

Confirmation: Yes No If yes, list Parish/Date: _____ / ____ / ____

Are you aware of any learning, physical or emotional difficulties your child is experiencing? Yes No

If yes, please explain: _____

Is your child in a special learning program or on a behavioral plan at his/her current school? Yes No

Has your child ever had counseling? Yes No If yes, please explain: _____

Are there any other details about your child that are important for the school to know, including repeated grades, attendance issues, or recent changes that may affect your child's school experience? Yes No

If yes, please explain: _____

My signature below confirms that I have accurately represented my family and child on this application. In addition, it acknowledges that I will accept and support the school's policies, procedures, mission and Catholic identity should my child attend the school.

SIGNATURE OF PARENT/GUARDIAN _____ **DATE** _____

- Re-registration fees are NON-REFUNDABLE and are only one part of the application process
- The 2nd part to complete admission would be the required tuition deposit due by June 1st for admission in September
- Forms must be turned in with the proper fees in order to be processed and to guarantee a spot in the class
- There are 2 mandatory fundraisers throughout the year, once in the fall and once in the spring
- Please note that all tuition information and arrangements are handled through the parish rectory.
PHONE:215-739-3102 MAIL: 3580 Salmon St. Phila, PA 19134

PLEASE SEND FORMS INTO THE SCHOOL OFFICE
OR MAIL THIS APPLICATION & FEES TO:
Saint George Catholic Elementary School
ATTN: Admissions
2700 E. Venango Street
Philadelphia, PA 19134

If you need to make any changes to the information provided on this application, please call 215-634-8803 to notify our school office.