



LOWER SCHOOL ENROLLMENT FORM 2012-2013

Please attach
photo here.

Student Information

Please Print

Name _____
First Middle Last Preferred Name

Address _____
Number Street Apt. #
City State Zip Code

Date of Birth (month/day/year) _____ Boy Girl

Citizen of the U.S.? Yes No If No, Citizen of _____

Language(s) _____
Primary Spoken at home

Current Teacher _____

Religious Background _____ Ethnic Background _____
(For Statistical Reporting Only) (For Statistical Reporting Only)

Is there any information about your child that you would like to share?

Names and ages of siblings

Does your child have other connections to St. John's? Please check all that apply

- Sibling currently attends
- Member of St. John's Episcopal Church
- Parent or other relative who attended St. John's Parish Day School (Please list relationship)

Family Information

Parent/Guardian

Please Print

Mr. Mrs. Ms. Dr. Other: _____

Relationship to Applicant _____

Name _____
 First MI Last

Home Address _____

City _____ State _____ Zip _____

Phone (Home) _____

(Cell) _____

(Work) _____

Preferred Email _____

Occupation/Title _____

Company Name _____

Parent/Guardian

Please Print

Mr. Mrs. Ms. Dr. Other: _____

Relationship to Applicant _____

Name _____
 First MI Last

Home Address _____

City _____ State _____ Zip _____

Phone (Home) _____

(Cell) _____

(Work) _____

Preferred Email _____

Occupation/Title _____

Company Name _____

If parents are divorced, with whom does the student live?

Who is financially responsible for the student?

Friends or relatives who have attended St. John's Parish Day School

Relationship

It is understood that the parents of the student agree to support and abide by school regulations and guidelines not only at the time of admission but also throughout subsequent years of attendance. All enrollments are for the entire school year.

Signature of Parent/Guardian

Date