



Grade applying for: _____

Registration for New Student to St. Mary's Visitation Elm Grove

St. Mary's School admits students of any race, color, and national or ethnic origin.

Student Name _____ **Goes by** _____
(Last Name) (First Name) (Middle)

Date of Birth _____ **Place of Birth** _____
(Month, Day, Year) (City, State)

Race _____ **Male** _____ **Female** _____

Father _____ **Religion** _____
(Last) (First) (Middle)

Occupation _____ **Employer** _____

Work Phone _____ **Place of Birth** _____

I have completed the Safe Guarding All Gods Children Class. Yes _____ **No** _____
When _____ **Where** _____

Mother _____ **Religion** _____
(Last) (First) (Maiden)

Occupation _____ **Employer** _____

Work Phone _____ **Place of Birth** _____

I have completed the Safe Guarding All Gods Children Class. Yes _____ **No** _____
When _____ **Where** _____

Address _____ **City** _____ **Zip** _____

Home Phone _____ **Cell Phone** _____

Main Family E-Mail Address _____

Baptism _____
(Date) (Name of Church) (City, State)

Child lives with **Both Parents** _____ **Mother** _____ **Father** _____ **Other** _____

School Last Attended _____ **Date Left** _____

Address of School _____
(Street Address) (City, State) (Zip)

Names of All Children in the family (List oldest first) _____

Registered at St. Mary's Visitation Parish Yes _____ **Month/Year** _____ **No** _____

Are you a graduate of SMV? Yes _____ **Year of Graduation** _____ **No** _____

NOTE: A copy of the student's Baptismal certificate must accompany this form, unless the student was baptized at St. Mary's Visitation, Elm Grove.

For office use only: Date of Registration _____ **Amount Paid** _____ **Cash** _____ **Check** _____