



St. Mary's Visitation School Re-enrollment Form 2011–2012

Family Last Name: _____
(please print)

K4 Enrollment:

Name: _____ Gr.: _____ Full Time: _____ Part Time: _____ *

Name: _____ Gr.: _____ Full Time: _____ Part Time: _____ *

* Full Time: 7:45 a.m.–2:45 p.m.

* Part Time: 7:45 a.m.–11:45 a.m.

K5 Enrollment:

Name: _____

Grades 1 through 8 Enrollment:

Name: _____ Gr.: _____ Name: _____ Gr.: _____

Name: _____ Gr.: _____ Name: _____ Gr.: _____

Name: _____ Gr.: _____ Name: _____ Gr.: _____

Please enclose the registration fee of \$100 per child and send to the office by Friday, January 28, 2011. Checks should be made payable to St. Mary's Visitation Parish School.

Please indicate below if your child/children will not be returning to St. Mary's School for the 2011–2012 School Year. If your child is graduating, do not list your child's name.

Name: _____ Gr.: _____ Name: _____ Gr.: _____

Name: _____ Gr.: _____ Name: _____ Gr.: _____

For office use only: Check number _____ Amount: \$ _____ Date: _____