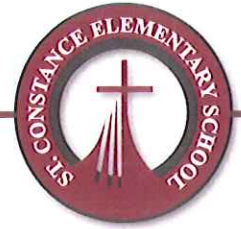


St. Constance School

Application for Re-Enrollment

2018-2019



Family Last Name

PLEASE NOTE THESE INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. List below the names of the children that will be attending St. Constance School for the 2018-2019 school year. Include the last name if different than the family name listed above.
2. If you have a child who will be starting school for the first time in 2018-2019 please contact the school office for an Application for Admission.
3. **A \$125.00 registration fee for each child is to be returned with this form.** Please return this form to the school office by Thursday, March 1, 2018 in order to secure a spot for the 2018-2019 school year. This fee should be paid with a check or money order and is non-refundable. **IF PAID AFTER MARCH 1, 2018 THERE WILL BE A \$100.00 LATE REGISTRATION FEE PER FAMILY.**

Names of Children

Grade in 2018-2019

Medical Information

Physician's Name:

Phone Number:

Dentist's Name:

Phone Number:

Allergies/Medical Concerns:

Please LIST ANY INFORMATION THAT HAS CHANGED since your last registration

Address:

Home Phone:

Mother's Cell:

Father's Cell:

Email(s):

Parent Signature:

Date:

For School Use Only - Do not write below this line

Notes: