

Application Request for Student Enrollment Information School Year 2018-2019

Please complete the form below if you are interested in receiving information for the school year 2018-2019 and return via fax or mail. All students must meet school requirements to qualify for enrollment. Additional information on registration dates and fees will be mailed when available.

Date of Request:			
Parent/Guardian Name: Last/Mother/Father			
Street Address:			
City:		State:	Zip:
Home Phone:		Work Phone:	
Cell Phone:		Email Address:	
NAME OF CHILD(REN)	DATE OF BIRTH	GENDER	ENTRY GRADE 2018-2019
1.			
2.			
3.			
4.			
5.			

ADDITIONAL INFORMATION:

Is your child baptized Catholic: Y__ N__ Is your family a registered parishioner of OLPH: Y__ N__

Current School: _____

Please list the month/year you would like to enroll your child: _____

COMMENTS: