



ST. TIMOTHY'S SCHOOL

STUDENT/FAMILY REGISTRATION 2020-2021

Family Name

Mother's Name / Guardian

Father's Name / Guardian

Address

Address (if different)

City, State, Zip

City, State, Zip (if different)

Home Phone

Work Phone

Home Phone

Work Phone

Cell Phone

Cell Phone

Email

Email

Children's Primary Residence:

Both Parents

Mother

Father

Other (describe) _____

Party Responsible for Children's Tuition:

Both Parents

Mother

Father

Other (describe) _____

Previous School Attended:

_____ (Name / City, State, Zip)

Our family is registered at:

_____ (Parish / Church Name and Location)

Parent / Guardian Signature

Date



ST. TIMOTHY'S SCHOOL

Student(s) Attending St. Timothy's School for the 2020-2021 School Year Kindergarten - Grade 8

Student's Full Name

Date of Birth

Grade level for '20-'21

(First, Middle, Last)

1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Please list the names and ages of children not attending St. Timothy's School:

Child's Name	Age/Grade	Current School (if school age)

Person(s) authorized to pick up your child from school in the case of illness or emergency:

Name	Home/cell Phone	Work Phone

Parent / Guardian Signature

Date