

LITTLE FLOWER SCHOOL
REGISTRATION FORM FOR GRADES K-8
2009-2010 School Year

This form is to be used for those students who currently attend LFS and who plan to return in August. The Registration Fee of \$100.00 for the first student, \$50.00 for each additional student, and all book fees (\$115 per student) must be returned with this form by February 20, 2009, in order to reserve your child's space for next year.

Family Name/Responsible Party: _____ Home Phone: _____

Complete Mailing Address: _____

Complete Physical 911 Address: _____

Family Email Address: _____ Bus #: A.M.: ____ / P.M.: ____

Please Circle: Catholic Non-Catholic

Parish in which you are a registered and participating member: _____

Father's Name: _____

Employer: _____ Occupation: _____

Cell: _____ Work: _____

Mother's Name: _____

Employer: _____ Occupation: _____

Cell: _____ Work: _____

Full Name(s) of child(ren) for Registration: Grade(s) entering 2009-2010

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**If you have a new student to register, please request a New Student Registration Form.*

REMEMBER – THE DEADLINE IS FEBRUARY 20, 2009

If you are transferring to another school, please provide the complete name and address of the school below:

_____ My child/ren will not be returning to Little Flower for the 2009-2010 School Year. You have my permission to forward records to the new school upon their request.

Parent Name _____ Date _____

Please help us keep track of our enrollment/withdrawal history by indicating the reason your children will not be returning: ___ Moving out of the area ___ Financial ___ Other _____