

HOLY TRINITY INTERPAROCHIAL SCHOOL APPLICATION FORM

Kindergarten—Grade 8

GRADE _____

2008 – 2009

Application Fee \$125.00 (Non-refundable)

Pupil _____
Last Name First Name Middle

Address _____ Telephone _____
Street Town ZipCode

Parish _____ Name Registered Under _____
(In Parish)

Main Family Email _____ Race(optional) _____

Date of Birth _____ Place of Birth _____ Sex _____ S.S.# _____

Father's Name _____

Father's Occupation _____ Religion _____ Work# _____

Cell Number _____

Father's Address (if different from child's)

Living _____ Deceased _____ Separated _____ Divorced _____

Mother's Name _____ (_____)
First Name Last Name Maiden Name

Mother's Occupation _____ Religion _____ Work # _____

Cell Number _____

Mother's Address (if different from child's)

Living _____ Deceased _____ Separated _____ Divorced _____

Child lives with: Both parents _____ Father _____ Mother _____ Father & Stepmother _____
Mother & Stepfather _____ Other _____

Baptism Date _____ Church _____ City & State _____

Penance Date _____ Church _____ City & State _____

First Holy Communion Date _____ Church _____ City & State _____

Confirmation Date _____ Church _____ City & State _____

Date of Entry _____ Grade _____ From _____

Name of School

Address

THIS IS NOT A REGISTRATION FORM, BUT AN APPLICATION PROCESS. YOU WILL BE NOTIFIED WHEN ACCEPTANCES ARE FINALIZED.