



NATIVITY *of* MARY SCHOOL

New Family & Kindergarten 2018-2019 Registration Form

9901 E. Bloomington Freeway - Bloomington, MN 55420 952-881-8160

Name of Child _____ M ___ F ___ Age _____ Date of Birth _____

Address _____ Zip _____ Phone _____

Child Lives with (Names) _____ Relationship _____

Registering in Grade _____ for the 2018-2019 school year.

List all languages spoken at home: _____

Parish Registered in: _____

**Registration fee of \$100.00 must accompany this form. This fee is non-refundable.
Tuition assistance available. All families must apply for aid by April 1 at TADS.com.**

Assigned school district and school district number _____

Last school my child attended was: _____

Name of School	Address
City	State
	Zip Code

Did the child attend Preschool? No _____ Yes _____	Where	School	City	State
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Mother's Name _____ Religion _____

Email Address _____

Father's Name _____ Religion _____

Email Address _____

Other Children in the family:

<u>Name</u>	<u>Birth Date</u>	<u>School Attending</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has your child received any additional help in learning? Yes ___ No ___

Title I, Reading, Speech, Etc. If so what area? _____

Parent/Guardian Signature _____ Date _____

Relationship to Child _____

Would you like your child bussed from your home or a day care? List the day care and the day care's address if applicable: