

## PRE-REGISTRATION

PLEASE PRINT.								
Family Name			Home Phone			Child's Date of E	Child's Date of Birth	
Child's Last Name			First			Middle		
Address			City		Zip			
How long at this address?			Email Ac	ddress	Ľ			
Father's Name					t			
Occupation			Place of Work					
Work Phone			Cell Phone					
Mother's Name					F			
Ccupation		Place of Work						
Work Phone		Cell Phone		t				
Parents' Marital Status:	Married 🗆 Separa	ated 🗌 Divo	rc <mark>ed</mark>					
Parishioner Status								
Do you have other children attending HFS?		□ Yes	□ No	Grade(s)	-			
Are you registered in Holy Family Parish?		🗆 No	Since when?	-				
Do you regularly contribute to Holy Family?		□ No						
Note: In order to be regarde actively involved in the paris					conti	ribute through the weekly par	ish envelope system and be	
Parent Signature				Date				
			OFF	ICE USE ONL'	(			
Parish Status								