

**St. Bernard's School  
Student Enrollment Form 2017-2018**

**This form is a statement of intent for parents to re-enroll their child(ren) to attend St. Bernard's School for the next school year. Parent(s) and/or guardian are asked to return this form by February 28, 2017.**

**At this time a non-refundable enrollment fee of \$200.00 for each student should be paid to reserve that student's enrollment for the coming school year.**

**Family Information**

**Family Name** \_\_\_\_\_  
(last) \_\_\_\_\_ (father) \_\_\_\_\_ (mother) \_\_\_\_\_

**Address** \_\_\_\_\_

**Telephone Home** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Father's Occupation** \_\_\_\_\_ **Wk Phone** \_\_\_\_\_

**Mother's Occupation** \_\_\_\_\_ **Wk Phone** \_\_\_\_\_

**We wish to have the following children enrolled at  
St. Bernard's school for the following 2017-2018 school year**

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**Student(s) Information**

**1. Name of Student** \_\_\_\_\_ **Grade for 2017-2018** \_\_\_\_\_

**2. Name of Student** \_\_\_\_\_ **Grade for 2017-2018** \_\_\_\_\_

**3. Name of Student** \_\_\_\_\_ **Grade for 2017-2018** \_\_\_\_\_

**4. Name of Student** \_\_\_\_\_ **Grade for 2017-2018** \_\_\_\_\_

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**Enrollment Fee (Non-refundable)** **\$200.00 per child** \$ \_\_\_\_\_

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**Office use only: Check #** \_\_\_\_\_ **Cash** \_\_\_\_\_ **Visa/MC** \_\_\_\_\_ **Amount \$** \_\_\_\_\_