



## 2019-2020 RE-REGISTRATION FORM

I/We wish to **re-register** the following child/ren for the 2019-2020 school year:

RETURNING K-8 STUDENT NAMES

STUDENT GRADE 2019-2020

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Check here if you have a sibling who is applying for acceptance:

Name \_\_\_\_\_ Grade \_\_\_\_\_ (Yes/No application submitted)

*Remember that siblings applying for Kindergarten or any other grades must submit an application prior to February 8, 2019 to hold their priority sibling space. The application is available in our front office or you may access it on our website.*

**Priority Spaces for our returning students are held until March 1, 2019. After that date, spaces open to new applicants to the school. Please include a non-refundable, re-registration fee of \$390.00 for each returning student with submission of this form.** Return this form and payment to the school office by Friday, March 1, 2019 to reserve a place for the 2019-2020 school year.

We are **NOT** planning to send our child/ren back to St. Louis Catholic School next year.

We may be receiving military orders requiring a move. Please hold our slot until we notify you on or by April 1<sup>st</sup>. (We understand that confirmation and registration fee must be given by April 1<sup>st</sup>.)

I/We accept and will comply with the St. Louis Catholic School philosophy/mission, and St. Louis Catholic School policies and regulations.

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address (including zip code)

Active Duty Military? \_\_\_\_\_

\_\_\_\_\_  
Name of registered parish for verification (if you have one)

Yes or No \_\_\_\_\_

\_\_\_\_\_  
Please PRINT family name

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Work Phone

Revised 1/19/2019