



HOLY FAMILY ELEMENTARY STUDENT REGISTRATION FORM

Student Name: \_\_\_\_\_  Male  Female \_\_\_\_\_  
First Name M. Initial Last Name Gender Birthdate Age

\_\_\_\_\_  White  Hispanic  Black  Asian/Pac. Island  Am. Indian/Alask \_\_\_\_\_  
Grade Entering Race/Ethnicity Child's Religion

\_\_\_\_\_ Social Security # \_\_\_\_\_ Parent's First & Last Names \_\_\_\_\_  
Registered Parish

Yes  No Are The Student's Parents:  
Is This Your Youngest At HFE?  Married  Divorced  Separated  Together/Unmarried  Single Parent Family

Student's Siblings:  
Name D.O.B.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*If a Single Parent Family, Please List the Information of Other Parent/Custodial Guardian who is Authorized to Receive Information on the Child. We *must* have this information on file:  
\_\_\_\_\_  
First & Last Name Address City State Zip Code

This Student Lives Primarily With:  
 Father & Mother  Father Only  Mother Only  Step-Father  Step-Mother  Other: \_\_\_\_\_

Emergency Contacts: (Please list 2 individuals who are NOT the parents/guardians):  
1.) \_\_\_\_\_  
First & Last Name Phone # Relationship to Student  
2.) \_\_\_\_\_  
First & Last Name Phone # Relationship to Student

\_\_\_\_\_  
Student's Address City State Zipcode Apt. #

\_\_\_\_\_  
Primary Telephone # Student's Mailing Address (if different from Home Address – include city/state/zipcode)

\_\_\_\_\_  
Father & Mother/Guardian's E-mail Addresses  Check Here if you Do **NOT** Have Access to Internet/Email at Home

\_\_\_\_\_  
Father's Employer Work Phone # Mother's Employer Work Phone #

\_\_\_\_\_  
Father's Cell Phone # Mother's Cell Phone # Student's Doctor & Phone # Student's Dentist & Phone #

\_\_\_\_\_  
If Transferring, Previous School Attended Address – include City/State/Zip Code

Please List **ANY** Health-Related Concerns Below (includes allergies, medications, vision/hearing problems, disabilities, major surgeries, etc.)  
\_\_\_\_\_

Check if student has been enrolled in a school in the Salina Diocese before?  Check if student has transferred out of HFE before?

\_\_\_\_\_  
Parent/Guardian Signature *\*Please notify the school office during the school year if you move, change phone #s or have other updated information!*