



Student Record Form

First Name Middle Name Last Name

- Male Female

Date of Birth _____ Age _____ Grade _____

SS# _____

Religion _____ Parish _____

Commitment Fee - \$150, after 2/2 fee is increased to \$250.00 per family.

Family Information

- Student lives with: Both Parents Mother Father Shared Custody*
**Provide Custody Agreement*
- Other _____

Household

Family Name
Address
City, State, Zip Code
Home Phone Number
Mother's Cellphone Number
Father's Cellphone Number

Parent/Guardian(s)

Name	Primary Email Address
Mother's Name	
Father's Name	
Guardian's Name	

(over)



Emergency Contacts (other than parents)

Name	Relationship	Best Phone #

Insurance Information

Insurance Company
Policy #
Group #
Doctor
Phone
Dentist
Phone
Hospital of Choice

Medical History

- Allergies Asthma Diabetes Epilepsy Heart Problems Recurring Illness
- Other _____

Transportation FOR GRADES 1-8 ONLY

- Bus to and from school Bus to school Bus from school
- Walker or car rider SEPTA