



## STUDENT REGISTRATION FORM

Date of Registration \_\_\_\_\_

Date Registration Paid \_\_\_\_\_

Copy of Birth Certificate \_\_\_\_\_

**Student Name** \_\_\_\_\_

Grade Entering in 22-23 \_\_\_\_\_

Gender \_\_\_\_\_

Birth Date \_\_\_\_\_

Social Security Number \_\_\_\_\_

Ethnicity \_\_\_\_\_

Religion \_\_\_\_\_

Baptismal Date \_\_\_\_\_

Currently on a Service Plan?  yes  no

Previously on a Service Plan?  yes  no

Student Address:

Street Address \_\_\_\_\_

City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

Public School District \_\_\_\_\_ (Toledo, Maumee, Anthony Wayne, Perrysburg, etc.)

Public School Bldg \_\_\_\_\_

(Name of School your child would attend if not at OLPH)

Student Lives With \_\_\_\_\_ Legal Guardian(s)  yes  no \_\_\_\_\_

**Primary Parent/Guardian :**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell \_\_\_\_\_ Work \_\_\_\_\_

Social Security Number \_\_\_\_\_

Email Address \_\_\_\_\_

Religion \_\_\_\_\_ Parish/Church \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

*Secondary Parent/ Guardian*

Name \_\_\_\_\_ relationship \_\_\_\_\_

Address \_\_\_\_\_

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Cell \_\_\_\_\_ work \_\_\_\_\_

Email Address \_\_\_\_\_

Religion \_\_\_\_\_ Parish/Church \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

*Emergency contact if parent cannot be contacted in an emergency*

1 Name \_\_\_\_\_ relationship \_\_\_\_\_

Cell \_\_\_\_\_ work \_\_\_\_\_

2 Name \_\_\_\_\_ relationship \_\_\_\_\_

Cell \_\_\_\_\_ work \_\_\_\_\_

3 Name \_\_\_\_\_ relationship \_\_\_\_\_

Cell \_\_\_\_\_ work \_\_\_\_\_