

Father

First and Last Name
Email Address
Cell Phone
Occupation
Name of Company
Title or Position
Business Address
Business email
Business Phone number

Mother

First and Last Name
Email Address
Cell Phone
Occupation
Name of Company
Title or Position
Business Address
Business email
Business Phone Number

Check where appropriate:

Parents Married/Together
 Father Deceased
 Mother Deceased
 Parents Separated
 Parents Divorced
 Father Remarried
 Mother Remarried

Student(s) resides with: Both Parents Mother Father Other

Please indicate how you wish all school mail to be addressed, including address of parent if not residing with student. Be sure to include title (e.g. Mr., Mrs., Ms., etc.)

Names: _____
 Address(es) _____

List any relatives who have attended Mater Dei Academy, Immaculate Conception School, Our Lady of Mount Carmel School, St Justin or St. Mary Magdalene Schools

Name	Relationship	School	Years Attended

All forms must be completed before your child is officially registered at Mater Dei Academy.

1. Please enclose a \$50 check for each child for placement on the list for first consideration when Open Enrollment begins the first week of March. Checks should be made out to Mater Dei Academy. **The Education Fee is non-refundable.**
2. You will be contacted to discuss availability at Mater Dei Academy for the coming school year. At this time, a copy of the student's school records will be requested and a meeting will be scheduled with the Principal. Acceptance will be based on review of current school records.