

St. Bernard's School

Returning Student Enrollment Form 2016-2017

This form is a statement of intent for parents to re-enroll their child(ren) to attend St. Bernard's School for the next school year. Parent(s) and/or guardian are asked to return this form by March 11th. Class openings will be made available to new incoming students after the above date.

At this time a non-refundable enrollment fee of \$175.00 for each student should be paid to reserve that student's enrollment for the coming school year.

☐ **Yes, we will be returning for the 2016-2017 School Year**

☐ **No, we will not be returning for the 2016-2017 School Year**

Family Information ☐ *Please check if this is a change of address*

Family Name_____

(last) (father) (mother)

Address/City/Zip _____

Telephone Home_____ **E-mail**_____

Father's Employment Information

Father's Occupation_____ **Wk. Phone**_____

Father's Employer_____

Father's Work Address_____

Father's Work City/Zip _____

Mother's Employment Information

Mother's Occupation _____ **Wk. Phone** _____

Mother's Employer _____

Mother's Work Address _____

Mother's Work City/Zip _____

**We wish to have the following children enrolled at
St. Bernard's School for the 2016-2017 school year**

Student(s) Information

1. Name of Student _____ **Grade for 2016-2017** _____

2. Name of Student _____ **Grade for 2016-2017** _____

3. Name of Student _____ **Grade for 2016-2017** _____

4. Name of Student _____ **Grade for 2016-2017** _____

5. Name of Student _____ **Grade for 2016-2017** _____

Enrollment Fee (Non-refundable) **\$175.00 per child** \$ _____

Office use only: Check # _____ **Cash** _____ **Visa/MC** _____ **Amount \$** _____