

SAINT PHILIP NERI SCHOOL

MOMMY & ME REGISTRATION INFORMATION

Family Name \_\_\_\_\_ Religion \_\_\_\_\_

Parish \_\_\_\_\_  Male  Female

Child's Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street Town Zip Home Phone Number

SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Race  White  Black  Hispanic  Asian  American Indian  Other

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_ Country of Birth \_\_\_\_\_  Deceased

Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_ Country of Birth \_\_\_\_\_  Deceased

Home Situation (Check all that apply) Language spoken at home if NOT English \_\_\_\_\_

Two Biological Parents  Father / Stepmother  Parents Separated or Divorced  
 One Parent  Mother / Stepfather  Other \_\_\_\_\_

Is there a custody agreement concerning your child?  YES  NO

**If YES, please include a copy. All court decrees must be on file in our school office**

Parental Rights (In case of separation or divorced)

**Legal Custody**  Joint Custody  Sole Custody  Mother  Father  Guardian

**Physical Custody**  Joint Custody  Sole Custody  Mother  Father  Guardian

If Guardian \_\_\_\_\_  
Last First County of Birth Religion

Emergency Contacts (other than Parent's)

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Please list any allergies: \_\_\_\_\_

Please bring the following forms / records with you when you register:

Birth Certificate  Immunization Records  Registration Fee  Custody Agreement  
If applicable

Signature of Parent / Guardian \_\_\_\_\_

Date \_\_\_\_\_