Holy Cross School

240 North Bishop Avenue, Springfield, PA 19064

610-626-1709 [www.hcscrusaders.com](http://www.hcscrusaders.com)

FAMILY RE-ENROLLMENT FORM

2018-2019

**This form is for current Holy Cross Students. Please use the New Student Application Form for siblings new to our school.**

**Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Father: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pre K Registration**:

|  |  |  |  |
| --- | --- | --- | --- |
| **Child’s Name Male or Female** | **Program** | **Date of Birth** | **Baptized Catholic:****Yes or No** |
|  | \_\_\_\_\_ Pre K 3 Full Day/ 5 days a week \_\_\_\_\_ Pre K 3 Half Day/ 5 days a week\_\_\_\_\_ Pew K 3 Half Day Extended/5 days\_\_\_\_\_ Pre K 3 Full Day/ 3 days a week \_\_\_\_\_ Pre K 3 Half Day/3 days a week\_\_\_\_\_ Pre K 3 Half Day Extended/ 3 days\_\_\_\_\_ Pre K 4 Full day/ 5 days a week\_\_\_\_\_ Pre K 4 Half Day Extended/ 5 days |  |  |

 **Kindergarten through Grade 8 Registration (all full- day programs)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Child’s Name Male or Female** | **Entering Grade** | **Date of Birth** | **Baptized Catholic:****Yes or No** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Contact Information:

|  |
| --- |
|  Full Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother’s cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother’s email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email for family communication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Marital Status: \_\_\_Married \_\_\_ Divorced \_\_\_ Single \_\_\_ Separated |

**Please check one:**

\_\_\_ We are active members of Holy Cross Parish; (we will sign up/ we are signed up for electronic giving).

\_\_\_\_ We are not members of Holy Cross Parish. If you are registered at another parish, please indicate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_