



... a step ahead in scholarship, service, community and message.

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GRADES 1-8 RE REGISTRATION 2010-2011

STUDENT INFORMATION (Please print)

Date: _____

Name(s) of RETURNING STUDENT(S):

Form with five rows for student names, each row containing fields for (last), (first), and (grade).

Box containing: \$300 Registration Fee, *Registration fees are NON-REFUNDABLE, Birth Certificate, Baptismal Certificate, Health Forms with checkboxes.

Address: _____

Phone: _____

Date of Birth: _____ Place of Birth: _____ Sex: ___ Male ___ Female

Previous School Name: _____
(if any) Address: _____

SCHEDULE

Monday thru Friday full days 8:50 am to 3:15 pm

FAMILY INFORMATION (Please print)

Marital Status: ___ Married ___ Divorced ___ Single ___ Widowed

Father: Name: _____
(first) (last if different from student)

Address: (if different from above) _____

Occupation: _____ Religion: _____

Mother: Name: _____
(first) (Maiden) (last, if different from student)

Address: (if different from above) _____

Occupation: _____ Religion: _____

Number of Children in Family: ___ Boys ___ Girls ___ Number attending AMBS

PARISH AFFILIATION: Are you a registered member of Most Blessed Sacrament Parish? Yes ___
No ___ If not, please provide the Name and Address of your Parish/Church you attend: _____

CENSUS INFORMATION:

Child (ren)'s Ethnic Heritage: ___ Asian ___ Black ___ Hispanic ___ Multi-Racial ___ White
___ Native Alaskan/American Indian ___ Native Hawaiian/Pacific Islander

* If child was Baptized at Most Blessed Sacrament, a Baptismal Certificate is not needed,
However, please provide the DATE of the child's Baptism _____
** A completed Health Form must be submitted between June 1 & Sept. 1 for returning 3rd & 6th graders.