

Holy Cross School
10672 County Road 8
Kimball, MN 55353
(320) 398-7885

**Grades PreK Through 6th Grade
REGISTRATION FORM 2015-2016**

Name of Child _____ M _____ F _____
Last First Middle

Home Address: _____

Date of Birth _____

Home Telephone # _____

Date of Baptism _____

Place of Baptism _____

(If your child was NOT baptized at Holy Cross, you will need to provide us with a copy of the Baptismal Certificate for our files.)

FATHER

MOTHER

Name: _____

Occupation _____

Work Address _____

Work Phone # _____

Cell Phone # _____

Email Address _____

Religion _____

Parish membership _____

Marital Status _____

Number of Children in Family _____ Older _____ Younger _____

List other children registered in Holy Cross School

Name	Grade
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Will your child be riding a bus? Yes _____ No _____ Other _____ (walk, bike, etc..)

Resident of School district # _____

Day Care Provider (if known at this time) _____

PreSchool will be on Mondays, Wednesdays, and Fridays from 8am until 3:10pm.

Has your child had a Pre-School screening prior to Kindergarten? Yes _____ No _____

If so, please indicate where this was done, so we may obtain it for our files: