

NATIVITY BVM HIGH SCHOOL

Registration Form

(Please print all information)

Grade for Enrollment: _____

Date of Registration: _____

SS # _____ - _____ - _____

Date of Birth: ____/____/____

Place of Birth: _____

Name of your Parish: _____ City _____

School District in which you reside: _____

School from which you are entering: _____

Last Name: _____

First Name: _____ Male ____ Female ____

Middle Name: _____

Address: _____

Phone Number: _____ Cell Phone _____

Office Use Only:	
Student Number: _____	
Grade: _____	
Homeroom: _____	
Registration Fee Paid: Cash _____	Check _____
	C.C. _____
Date Registered: _____	

City: _____

State: PA Zip: _____

Township: _____

Student Religion: Catholic _____ Non-Catholic _____

Pupil lives with: Father _____ Mother _____

Other _____

FAMILY INFORMATION

	NAME	Liv	Dec	Religion	Elem	H.S.	Col.	Occupation	Firm Address	Firm Phone
Father										
Mother										
Guardian										

Number of Children in Family: _____ Number of children already attending Nativity: _____

Do you work for the Diocese of Allentown: Yes ____ No ____ (If "yes", please continue.)

Place of Employment: _____ (If a teacher, please continue.)

Diocesan School at which you teach: _____ Grade/s you teach: _____

Tuition to be billed to: Name: _____

(If different than parents)

Address: _____

City: _____ Zip: _____