



OUR LADY OF THE HAMPTONS REGIONAL CATHOLIC SCHOOL

FAMILY RE-REGISTRATION FORM 2019

Each family is asked to fill out and return this form to the school office on or before February 15. This will assist in planning and setting next year's budget.

FAMILY NAME _____

MAILING ADDRESS _____

TOWN _____ **ZIP** _____

As of this date*, it is our intention to re-register our child(ren) for the school term at OLH beginning in September 2019.

Name _____ grade in September _____

Name _____ grade in September _____

Name _____ grade in September _____

This student, _____ currently in Prep8,
will attend _____ for high school

As of this date, it is our intention to transfer our child(ren) to

_____ For September 2019

Signature of parent _____ Date _____

- While there is no re-registration fee due at this time to hold your child's place, be advised that transfers after March 15 notification will require a \$150 withdrawal fee.