

# All Saints Academy Registration Form - New Student

Child's Name:

\_\_\_\_\_  
Last First Middle

Address:

\_\_\_\_\_  
Street, Town, State, Zip Code

Telephone #:

\_\_\_\_\_

Email:

\_\_\_\_\_

Place of Birth:

\_\_\_\_\_

Date of Birth:

\_\_\_\_\_

Place of Baptism:

\_\_\_\_\_

Date of Baptism:

\_\_\_\_\_

Place of First Communion:

\_\_\_\_\_

Date of First Communion:

\_\_\_\_\_

Grade Entering:

\_\_\_\_\_

Last School Attended:

\_\_\_\_\_

Special Programs (e.g. Chapter 1, Chapter 766, Speech):

\_\_\_\_\_

Father/Guardian:

\_\_\_\_\_

Mother (maiden):

\_\_\_\_\_

Address (if diff.):

\_\_\_\_\_

Place of Birth:

\_\_\_\_\_

Telephone #:

\_\_\_\_\_

Place of Work:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parish/Church (registered):

\_\_\_\_\_  
Name and address

Siblings attending

\_\_\_\_\_

Grade:

\_\_\_\_\_

All Saints Academy:

\_\_\_\_\_

Grade:

\_\_\_\_\_

\_\_\_\_\_

Grade:

\_\_\_\_\_

Preschool Children:

\_\_\_\_\_

Year of Birth:

\_\_\_\_\_

\_\_\_\_\_

Year of Birth:

\_\_\_\_\_

\_\_\_\_\_

Year of Birth:

\_\_\_\_\_

How will your child commute to school?

\_\_\_\_\_ Car

\_\_\_\_\_ Bus

\_\_\_\_\_ Walk

Parent/Guardian Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_

*Signature should be legal guardian who will receive mailings from school.*

Items needed to complete the registration process:

Completed Registration Form

Birth Certificate

Registration Fee - \$85.00 per student

Items needed prior to the start of school:

Baptismal Certificate (if child is baptized)

First Communion certificate for students entering Grade 3 through Grade 8 (if completed)

Physical and Immunization Records current within the year

A copy of all Academic Records (from sending school)

**Mail to: All Saints Academy, 48 Negus Street, Webster, MA 01570**

Date Received (office use)

\_\_\_\_\_

In keeping with the Catholic concept of education, All Saints Academy does not discriminate on the basis of race, color, religion or national origin.