



Sacred Footsteps

CURRENT STUDENT REGISTRATION INFORMATION

DATE: _____

Parent(s) Name(s): _____

Student Name: _____

Student Date of Birth: _____ Current Age: _____ Current Grade: _____

Parent email: _____

Parent phone number: _____

Pre-K: Tues/Thursday _____

Junior Kinder: Tues/Thursday _____ M/Tues/Wed/Thurs _____ Other _____

- I agree to the 9 Volunteer Hours per School Year (12 for Junior Kinder 4-day/week student parents), as outlined in the Parent Handbook. We will sign up for our Volunteer Hours by the end of the August Parent Meeting when scheduled. Volunteer Roles Doc will be distributed by July 31, 2020. Thank you so much for your support of our school!

Authorized Person(s) who may be picking up your child:

Printed Name: _____ Relationship to Student: _____

Phone Number: (____)-_____ (____)-_____

Address: _____