



Sacred Heart Academy

CURRENT STUDENT REGISTRATION INFORMATION

DATE: _____

Parent(s) Name(s): _____

Student Name: _____

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

Parent email: _____

Parent phone number: _____

Attendance:

Full-Time - Mon/Tues/Wed/Thurs: _____

- For Full-Time Students, we understand that we will be responsible for some instruction on Friday, whether done on my own at home, or by sending my child to classes offered on Fridays at SHA. Friday Class offerings will be sent out in July 2020, and details/guidance for the required Friday instruction will be outlined at the Parent Meeting.

Part-Time - Tues/Thurs: _____

For Full-Time and Part-Time Students:

- I agree to the 15 Volunteer Hours per School Year (10 hours/year for Part-Time students) 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: _____