



Sts. Peter and Paul Catholic School
Re-Enrollment Application

_____ Yes, my child will be returning to Sts. Peter and Paul Catholic School for the 2016-2017 School Year

Final Acceptance is contingent upon receipt of all documentation and all accounts being paid current.

_____ No, my child will not be returning to Sts. Peter and Paul Catholic School for the 2016-2017 School Year.

**I understand that my financial obligation to SPPCS must be met prior to the release of my student's records.
I also understand that I must formally withdraw by filling out a Withdrawal Form at the School Office.**

Student's Name: _____
(Last) (First) (Middle)

Home Telephone: _____

Address: _____
(Street, Route, Box #)

(City) (State) (Zip)

Date of Birth: _____

Religion: _____

Emergency Contact (other than parent/guardian): _____

Family Information

Parent 1/Father
Name: _____

Parent 2/Mother
Name: _____

Stepparent Name: _____

Stepparent Name: _____

Home Address (if different from student)

Home Address (if different from student)

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

Business Phone: _____

Business Phone: _____

If a Parent is to be excluded, the custodial parent MUST provide court documentation