

PRE-REGISTRATION FORM

Saint Mary Interparochial School
Fifth and Locust Streets
Philadelphia, PA 19106
215-923-7522

Please print or type all information.

APPLYING FOR GRADE

Student's Last Name First Name Middle Name / /
Date of Birth

Address: _____

City, State, Zip _____

Primary Phone # _____ Second Phone # _____

Religion: Catholic _____ Parish in which you are registered _____

Non-Catholic _____ What denomination? _____

Student Social Security # _____

School Presently Attending _____

Relatives presently enrolled at St. Mary School? _____

How did you learn about St. Mary Interparochial School? _____

Mother's First Name Maiden Name Last Name

Occupation/Employer _____ Email: _____

Father's First Name Last Name

Occupation/Employer _____ Email: _____

Married _____ Separated _____ Divorced _____ Single _____ Re-married _____

Is child living with anyone other than biological parents? No _____ Yes _____

If yes, please give name and relationship to child. _____

Emergency contact if parents/guardians are unavailable:

Name Cell Phone Number(s)

Date Received at St. Mary Interparochial School _____