

St. John Brebeuf School
Re-Registration Form 2011-2012

Family Name: _____

Address: _____ City/Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Parishioner: Yes _____ Please circle name of Parish: SJB St. Martha OLR SIJ
No _____

Please list your children who are returning or will be attending for the first time.
(Request a new student form at the bottom of the page.)

Grades 1 through 8:

Name: _____ Grade Next year: _____

Name: _____ Grade Next year: _____

Name: _____ Grade Next year: _____

Name: _____ Grade Next year: _____

Kindergarten

Name: _____ Full day _____ Half day _____

Prekindergarten (4 year old)

Name: _____ AM 3 days _____

AM 5 days _____

Extended day (4 yr olds only): _____

Preschool (3year olds)

Name: _____ AM 2 days (Monday & Wednesday)

Registration form and \$250.00 per student registration fee due by March 15, 2011