

HOLY FAMILY SCHOOL SYSTEM
Family Enrollment 2017-2018

The family enrollment fee for currently enrolled families is \$60.00 if received by **Friday, February 10, 2017** and \$75.00 if received after that date. All newly enrolled families will be charged the \$60.00 enrollment fee, regardless of the date received. The enrollment fee **MUST** accompany this form. The fee is non-refundable after June 30, 2017, unless the family is moving out of the metro area. This enrollment fee will not be applied to tuition.

FATHER/GUARDIAN NAME _____ H/Phone _____
(Last) (First) (MI)
_____ Cell Phone _____
(Home Address)

(City) (State) (Zip)
Place of Employment _____ W/Phone _____
E-mail Address _____

MOTHER/GUARDIAN NAME _____ H/Phone _____
(Last) (First) (MI)
_____ Cell Phone _____
(Home Address)

(City) (State) (Zip)
Place of Employment _____ W/Phone _____
E-mail Address _____

PERSON(S) RESPONSIBLE FOR TUITION PAYMENT IF DIFFERENT THAN ABOVE:

NAME _____ H/Phone _____
(Last) (First) (MI)
_____ Cell Phone _____
(Home Address)

(City) (State) (Zip)
Place of Employment _____ W/Phone _____
E-mail address _____

Newly Enrolled Families Only: Please list one current Holy Family family who referred you _____

PLEASE COMPLETE THE FOLLOWING INFORMATION:

1) Previous School:

- If new student, list previous school _____
- If enrolling in kindergarten: Fill out all that apply
 - Attended preschool at _____
 - Has not attended preschool
 - Attended Alternative Kindergarten (AK) at _____

2) Resident School District: (Check one)

____ Cedar Rapids Community ____ College Community
____ Other: (Please list) _____

Name of Neighborhood School: Elementary (K-5) _____
Middle (6, 7, 8) _____

3) County of Residence _____

(OVER)

