

St. Leonard School
W173 S7777 Westwood Dr.
Muskego, WI 53150-9160
(262) 679-0451

Date of Registration _____

School Year _____ Grade _____

Please Circle: K3 Program: Full Day Half Day Three Days Five Days
 K4 Program: Full Day Half Day
 K5 Program: Full Day Half-Day

Child's Name _____
 Last First Middle (full name)

Birthplace		Birthdate		
City	State	Month	Day	Year

Foster Child/Adopted? _____ Male _____ Female _____

Home Phone (____)_____ Mom's Cell (____)_____ Dad's Cell (____)_____

Present Home Address		
Street	City	Zip

If Moving, Future Address: _____

Anticipated Date of Move: _____

Mom's Email: _____ Dad's Email: _____

School Last Attended _____ Year(s) _____
Name

Address	City/State/Zip
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Sacraments Received:

Baptism _____
Date _____ Parish/City/State _____

Other	Sacrament	Date	Parish/City/State

Father's Full Name _____ Religion _____
 First Middle Last

Place of Employment _____ Work Phone (____) _____

Occupation _____

Mother's Full Name _____ Religion _____

First Middle Last Maiden Name

Place of Employemnt _____ Work Phone (_____) _____

Occupation _____

Marital Status _____ If Divorced, Child Lives With _____

Are you a registered member of St. Leonard Parish?

Names and Birth Dates of ALL Children in the Family (Please list the oldest first):

1. _____ 3. _____
2. _____ 4. _____

Signature of Parent _____ Date _____

Referring Family _____
(only one referring family name can be listed per new family)