

STATEMENTS: The schools of the Diocese of Columbus recruit and admit students of any race, color, or ethnic origin to all its rights, privileges, programs, and activities. In addition, the schools will not discriminate on the basis of race, color, or ethnic origin in the administration of their educational programs and athletics/extracurricular activities. Furthermore, the schools are not intended to be an alternative to court or administrative agency ordered; or public school district initiated desegregation."

DIOCESE OF COLUMBUS

Registration RECORD FOR: _____

(Student) last name _____ First name _____ Middle name _____

Last 4 digits of student's social security number: _____

Date received in office: _____ Name student goes by: _____

Circle the Public School District in which you reside: South-Western City Schools Columbus Public Schools Teays Valley Westfall Other _____

NON-REFUNDABLE REGISTRATION FEE OF \$30.00 - Check# _____ Cash _____ Paid _____

Parish: _____ For Grade: K 1 2 3 4 5 6 7 8 For Year: _____

Catholic _____ Non Catholic _____	SEX	BIRTH DATE			BIRTH PLACE	
	M _____ F _____	MO.	DAY	YEAR	CITY	STATE
RESIDENCE						
STREET ADDRESS		CITY		STATE/ZIP	TELEPHONE	

RACE: _____ White, not Hispanic _____ Black, not Hispanic _____ Hispanic _____ Asian Pacific Islander _____ American Indian/Alaskan Native

You are not required to answer this question.

FAMILY				
FATHER OR GUARDIAN	BIRTH PLACE	RELIGION	EDUCATION	TYPE OF OCCUPATION
E-mail	PLACE OF OCCUPATION	BUSINESS ADDRESS		BI CONTACT NUMBERS
				Office: Cell:
MOTHER	BIRTH PLACE	RELIGION	EDUCATION	TYPE OF OCCUPATION
E-mail	PLACE OF OCCUPATION	BUSINESS ADDRESS		BI CONTACT NUMBERS
				Office: Cell:
HOME STATUS		STUDENT LIVES WITH:		TOTAL NO. OF CHILDREN IN FAMILY _____
Check any that apply: _____ Single _____ Both Parents _____ Step-Father		_____ Father _____ Step-Mother		BOYS
_____ Parents Separated _____ Father Deceased _____ Mother		_____ Mother Other _____		GIRLS
_____ Parents Divorced _____ Mother Deceased				OLDER
				YOUNGER
				OLDER
				YOUNGER

Date/Year registered in parish _____

Did you attend/graduate from Our Lady _____ List year(s) _____

Do you have relatives who are Our Lady parishioner(s) _____

What areas, if any, are you active in at Our Lady _____

SACRAMENTS WE MUST HAVE A BAPTISMAL CERTIFICATE FOR ALL STUDENTS ENTERING OUR LADY						
BAPTISM						
FIRST COMMUNION						
PENANCE						
CONFIRMATION						
	MONTH	DAY	YEAR	CHURCH	CITY	STATE

PROOF OF CUSTODY REQUIRED UPON ADMISSION

_____ Copy of custody papers has been provided to school.* * Required for those who are separated or divorced.

Names of natural parents _____ Name(s) of custodial parent(s) _____

Name and Address of School last attended: _____
