

St. Anne Parish, Southborough
Middle School Registration Form 2009/2010
REGISTRATION DUE: OCTOBER 1ST

Student Name 1: _____ Grade _____
Student Name 2: _____ Grade _____
Address: _____ School _____
Parent Name _____
Home Phone: _____ Parent Email _____
Phone where parent can be reached during class time _____

In case of emergency, if I cannot be reached at the above numbers, please contact:

Name: _____ (relationship) _____ Phone: _____

Medical Information

Does your child have any allergies? Specify: _____

Does your child have any medical conditions that the teachers should be aware of? (asthma, diabetes, epilepsy, etc.)
Specify _____

Will your child need to have any medication on hand? (inhaler, epi-pen, etc?) _____
Specify: _____

Please enroll my child in the following classes:

_____ Sunday classes: Oct 25, Nov 15, Dec 13, Jan 24, Feb 28, Mar 21, Apr 11, May 2

_____ Tuesday classes: Oct 27, Nov 17, Dec 15, Jan 26, Mar 2, Mar 23, Apr 13, May 4

_____ I am willing to teach/share a class.

Registration Fee: \$40 per student/\$100 family maximum. Fees paid for siblings in other programs count toward family maximum. No student will be turned away because of inability to pay registration fees. Please see Fr. Garlick or Cindy de la Pena to request a waiver.

Behavior Policy:

Students are expected to treat their teachers, fellow students, and Church property with respect at all times. Parents will be called immediately to pick up a student who acts in a manner which endangers him/herself or others.

Students who repeatedly act in a manner which is disrespectful or disruptive to the learning environment may be dismissed from class and required to return at another time to attend a makeup session with Mrs. de la Pena before they will be permitted to return to their regular class.

Student signature _____

Parent signature _____

Date _____

**Additional copies of this registration form are available at www.stanne-southboro.org
Or you may photocopy this form as needed for additional students.**