



CHRIST THE KING SCHOOL REGISTRATION FORM

To be filled out by volunteer:

Lottery Number _____
Sibling at CKS _____

GRADE APPLYING FOR: PRE-K _____ 2 year old _____ M-F _____ M/W/F _____ T/Th
PRE-K _____ 3 year old _____ 4 year old

**Must be 2 before Aug. 1 for Pre-K2/ 3 before Aug. 1 for Pre K3/
4 before Aug. 1 for Pre K4**

**KINDERGARTEN _____
Must be five before Aug. 1 for Kindergarten**

**GRADE 1-8 _____ (list grade desired)
Must be six before Aug. 1 for grade one**

Catholic _____ Non-Catholic _____ Parish _____

STUDENT INFORMATION

NAME: _____ M F
LAST FIRST MIDDLE (circle one)
NAME CHILD WISHES TO BE CALLED: _____ GRADE CURRENTLY ENROLLED IN _____

CHILD'S SSN _____
Child's Permanent Living Address:
(**DO NOT** put caretaker address such as grandparent, relative, daycare, sitter, etc.)

STREET CITY ZIP PHONE: () _____

RACE: _____ STUDENT LIVES WITH: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____ RELIGION: _____

SPECIAL LEARNING CHALLENGES _____

BAPTISM: _____
DATE CHURCH CITY STATE

FIRST RECONCILIATION: _____
DATE CHURCH CITY STATE

FIRST EUCHARIST: _____
DATE CHURCH CITY STATE

CONFIRMATION: _____
DATE CHURCH CITY STATE

SCHOOLS ATTENDED: List most recent first

NAME ADDRESS CITY ZIP

FATHER/GUARDIAN INFORMATION

NAME: LAST FIRST MIDDLE

STREET CITY ZIP PHONE: ()

EDUCATION: MARITAL STATUS:

DATE OF BIRTH: PLACE OF BIRTH: RELIGION:

PLACE OF EMPLOYMENT: ADDRESS:

OCCUPATION: PHONE:

MOTHER/GUARDIAN INFORMATION

NAME: LAST FIRST MIDDLE

STREET CITY ZIP PHONE: ()

EDUCATION: CURRENT MARITAL: MAIDEN NAME:

DATE OF BIRTH: PLACE OF BIRTH: RELIGION:

PLACE OF EMPLOYMENT: ADDRESS:

OCCUPATION: PHONE:

Language in home other than English

Ages of other children in the family Boys Girls

Family email address:

How did you hear about CKS? parish advertising referral? If so, the family name

Your Signature below certifies:

1. That you have received and understand the CHRIST THE KING Enrollment Policy
2. The information you have provided is accurate
3. That you are the Natural Parent of Legal Guardian (not Limited Educational Guardian) of the prospective student

So certified: _____ Date: _____

For Office Use Only:

_____ CTK Registered Family _____ Birth Certificate _____ Baptismal Certificate _____ Utility Bills

_____ Registration Fee Enclosed _____ check #