

St. Edward on-the-Lake School, 6995 Lakeshore Road, Lakeport, MI 48059

www.stedwardonthelakeschool.org

email – stedwardschool@hotmail.com

K-5 ENROLLMENT DATA FORM

School Year: _____

Entry Date: _____

Grade Level _____ Non-Catholic _____ Catholic _____ Home Parish: _____

Student: _____ Sex M F Date of Birth: _____
First Middle Last

Address: _____
Number & Street City State Zip

Did your child attend PreSchool _____ If yes, where and how long _____

Special Needs, Allergies, etc. _____

Place of Birth: _____

Legal Guardian or Custodial Parent: _____

Father: _____ Phone/Home _____ Work _____

Address _____
Number & Street City State Zip

Occupation Religious Denomination Country of Birth

Father Email Address: _____

Mother: _____ Maiden Name _____ Phone/Home _____ Work _____

Address _____
Number & Street City State Zip

Occupation Religious Denomination Country of Birth

Mother Email Address: _____

Marital Status _____ Married _____ Separated _____ Divorced

Child's Baptism _____ (Include date, Church, City & State)

Eucharist _____ (Include date, Church, City & State)

Penance _____ (Include date, Church, City & State)

Other Children in the Family:
Name

Date of Birth

Schools Previously Attended:

Name of School City State Date Grade

Your child's Passport to Excellence