

ST. THOMAS CATHOLIC GRADE SCHOOL

2009 – 2010 RE-REGISTRATION FORM

RECD _____
CK# _____
AMT _____

**Return Completed Form To The School Office No Later
Than Wednesday, March 11, 2009**

Book Fee: \$175.00/Student

- Checks Payable to St. Thomas School
- Non-Refundable
- 1/2 Payable on 3/11/09
- Remaining 1/2 Payable on Fee Day – August 2009

**Complete the following Name and Address Information, as it will
appear in the Student/Parent Directory.**

Last Name	Father's Name	Mother's Name

Street Address	Mailing Address	

City	State	Zip Code

Home Phone #	E-Mail Address	

Please use the second page of this form to re-register only the students that are **Currently Attending** St. Thomas Catholic Grade School. **Do Not** add the names of children that you will be registering as **New Students**.

It is important that you complete and return this form along with your book fees by the deadline date. The school will send appropriate paperwork for each of your registered child(ren) in the coming months.

2009 – 2010 RE-REGISTRATION

GRADE ENTERING

STUDENTS FULL NAME

8th Grade

First	Middle	Last
First	Middle	Last

7th Grade

First	Middle	Last
First	Middle	Last

6th Grade

First	Middle	Last
First	Middle	Last

5th Grade

First	Middle	Last
First	Middle	Last

4th Grade

First	Middle	Last
First	Middle	Last

3rd Grade

First	Middle	Last
First	Middle	Last

2nd Grade

First	Middle	Last
First	Middle	Last

1st Grade

First	Middle	Last
First	Middle	Last