



**Student Pre-Enrollment Form  
2019-2020 School Year**

Pre-Enrollment information will be complete upon receipt of this form and payment; receipt of this form will reserve your child's enrollment for the 2019-2020 school year. If viewing document on our website, use the Fill and Sign option in Adobe-complete the form, resave the file (use your family name as the file name) and send it to [bolmes@stmarys-boise.org](mailto:bolmes@stmarys-boise.org). Please update information to remain current on the wait list.

**PLEASE INCLUDE THE \$25.00 PER CHILD NON-REFUNDABLE PRE-ENROLLMENT FEE.**

Last: \_\_\_\_\_ First: \_\_\_\_\_ Grade \_\_\_\_\_ School Year \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Baptism Date: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

Last: \_\_\_\_\_ First: \_\_\_\_\_ Grade \_\_\_\_\_ School Year \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Baptism Date: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Place of employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father's Religion/Parish \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother's Religion/Parish \_\_\_\_\_

Name of Prior School (if applicable): \_\_\_\_\_ Location: \_\_\_\_\_