



ST. MARY'S SCHOOL
 2211 E. LAKEVIEW DRIVE
 JOHNSON CITY, TENNESSEE 37601
 TELEPHONE: 423/282-3397
 FACSIMILE: 423/282-0224

Accredited by the Southern Association of Colleges & Schools (SACS)

PRE-REGISTRATION FORM
(Please complete a separate form for each child)

Grade for Pre-Registration _____ **For School Year** _____

Child's Full Name _____

Child's Birthdate _____

Parent's Name (Father) _____

(Mother) _____

Address _____

Home Telephone # _____ **Work Telephone #** _____

Registered Parish _____

Address of Parish _____

Telephone # of Parish _____

Name of Siblings on Pre-Registration List for Other Grades

Name	Grade	School Year
_____	_____	_____
_____	_____	_____

If you are transferring schools, when do you anticipate your child's first day at St. Mary's School will be? _____

If possible, please provide us with the name and telephone # of a local contact person: _____

(There is a \$20. per family Pre-Registration Fee)

FOR OFFICE USE ONLY

Pre-Registration Fee Paid

Cash _____

Check # _____