

ST. STANISLAUS PREP 2022-2023 PREP YEAR

RETURNING FAMILY **ADDITIONAL CHILD REGISTRATION FORM**

Family Name: _____

Child's Name: _____
(Last Name) (First Name) (Middle Name) (Nickname)

Grade in the Fall 2022: _____ School: _____

Has this child previously attended Religious Education Classes? Y / N

If yes, Parish _____ Last Grade Completed _____

Date of Birth: _____

Place of Birth: City _____ State _____

Baptism: Parish _____ Date _____

Address: _____
(Street) (City) (State) (Zip)

If registering your child for the first time, please provide a photocopy of your child's **Baptismal** Certificate if he/she was baptized at another parish. (We can verify St. Stanislaus baptisms.)

If any other sacraments have already been received, please indicate below:

Reconciliation: Parish _____ City/State _____ Date _____

First Communion: Parish _____ City/State _____ Date _____

Confirmation: Parish _____ City/State _____ Date _____

Medical Conditions or Allergies <small>(please describe below)</small>	Prescribed Medications <small>If Yes, does the student carry it on their person?</small>	Learning Support Services or *Disability <small>(see IDEA definitions below) (please note type of disability/support)</small>	IEP <small>Individualized Education Program</small>	**Immunization <small>Are your child's vaccinations up to date?</small>
<input type="checkbox"/> YES _____ <input type="checkbox"/> NO _____	<input type="checkbox"/> YES <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NO	<input type="checkbox"/> YES _____ <input type="checkbox"/> NO _____	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO <small>If no, has he/she received an exemption from your current school?</small> <input type="checkbox"/> YES <input type="checkbox"/> NO

Please note any other information pertinent to your child that will assist us in the classroom:

*** IDEA:** As defined by Individuals with Disabilities Education Act (IDEA), the term "child with a disability" means a child with: an intellectual disability, a hearing impairment (including deafness), a speech or language impairment, a visual impairment (including blindness), a serious emotional disturbance, an orthopedic impairment, autism, traumatic brain injury, another health impairment, a specific learning disability, deaf-blindness, or multiple disabilities, and who, by reason thereof, needs special education and related services.

****Immunization:** *Even if your child is exempt from immunizations, he/she may be excluded from school during an outbreak of the vaccine preventable disease.*