



Peru Catholic School

2003 Fifth Street
Peru, IL 61354
Phone: 815-224-1914
Fax: 815-223-1354
Web Site: perucatholic.org

2019-2020 REGISTRATION FORM

Parents~

Thank you for taking your time to complete our registration form. The information you provide will enable us to more accurately determine enrollment, staffing, and curricular needs. **If you don't plan on returning, please write you last name then "None" under Grade on line 1.**

STUDENT INFORMATION FOR NEW AND RETURNING STUDENTS

	Name	Grade for 2019-2020
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____

INFORMATION FOR NEW FAMILIES ONLY

Parent/Guardian Name _____

Address _____
Street City Zip

Home Phone _____ Work Phone _____

Are you a member of one of the Catholic Parishes in Peru? Yes No

INFORMATION FOR PRE-K PROGRAM _____ 3 yr old _____ 4 yr old

Please check one box in each row.
 Mon - Fri Tue - Thu
 _____ _____

PLEASE SIGN AND DATE AND RETURN TO THE SCHOOL'S OFFICE WITH A \$50.00 DEPOSIT

Parent signature

Date

