



ARCHDIOCESE OF MIAMI • 2020 – 2021 REGISTRATION FORM

Little Flower Catholic School Hollywood

Please complete all fields below.

STUDENT INFORMATION

Student Name:		Grade:
		Student Birthdate:
Address:		City, State Zip:
Student Home Phone:	Gender:	
Place of Birth:		
Previous school attended:		
Religion:	Ethnicity:	<input type="checkbox"/> American Indian / Native Alaska
Present Parish:		<input type="checkbox"/> Asian
Parent e-mail: required		<input type="checkbox"/> Black
Parent e-mail required		<input type="checkbox"/> Native Hawaiian / Pacific Islander
Language spoken in Home	Select One:	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic
**e-mail address required to access report cards		

PARENT/GUARDIAN INFORMATION

Student Lives with: <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian:			
Mother's/Guardian Name: <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.		Father's/Guardian Name:	
Mother's Address:		Father's Address:	
City, State Zip:		City, State Zip:	
Home Phone Number:		Home Phone Number:	
Cell Number:		Cell Number:	
Work Number:		Work Number:	
Email:		Email:	
Employer:		Employer:	
Position:		Position:	
Signature	Catholic: <input type="checkbox"/> Yes <input type="checkbox"/> No	Signature	Catholic: <input type="checkbox"/> Yes <input type="checkbox"/> No

OTHER INFORMATION

Emergency Contact:		Relationship:
Phone Number:	Cell Number:	
Physician's Name:	Physician's Phone Number:	
Medical conditions/Medications:		
Family member(s) currently attending this school (list grade level/relationship):		
Immunization Certificate	Report Card	Registration Fee
Birth Certificate	Test Scores	
Baptism Certificate	1 st Communion Certificate	

Names of person(s) with permission to pick-up student during school hours:

I, as Parent or Legal Guardian, acknowledge that I have read the entire contents of the Parent-Student Handbook and understand the consequences of any violations of the rules and policies of the school. I certify, to the best of my knowledge, that the information provided is true and accurate.

Parent/Guardian signature:	Date:
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NOTE: The Archdiocese of Miami is authorized under federal law to enroll nonimmigrant alien students and issue i-20 certificates in order for students to obtain F-1 status. If you need assistance, please let the school know at registration.