

ST. JONAH ORTHODOX SCHOOL

Holy Virgin Protection Cathedral
1800 Lee Street
Des Plaines, IL 60018

REGISTRATION FORM

2016-2017 School Year

Family (Last) name: Фамилия (по-русски):

Home Address: Apt:

City: State: Zip: Home phone:

Mother's full name:

Mother's cell phone: Mother's email:

Employer: Position:

Father's full name:

Father's cell phone: Father's email:

Employer: Position:

	Child 1	Child 2	Child 3	Child 4
Name:
Last Name:
Date of Birth:
Orthodox Name:
Namesday:
Имя по- русски:
Фамилия по-русски:
Grade at this school:
Allergies*:
AM/PM session: (preference)

* If your child has severe food allergies, you will be required to sign an Allergy Form and be present for all meals served at school.

Note: An Orthodox Baptismal Certificate (Метрическая выпись о крещении ребенка в Православной вере) must be attached for each child with this Registration Form, if you have not submitted one previously.

Please state your reasons for wanting your child/children to be enrolled at St. Jonah Orthodox School.
If your child/children is/are not baptized in the Orthodox faith, please explain.

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Contact person in case of emergency (**other than Parents listed above**):

Name: Relationship:

Home telephone: Cell phone:

All of the above information is true and accurate to the best of my knowledge. I have not falsified any of the above information. I have read the School's regulations and information and agree to abide by these rules as long as my child/children continues/continue to be enrolled at St. Jonah's School and participate in all school activities.

Print name: Signature:

Date: 20.....

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FOR SCHOOL USE ONLY:

Accepted: 20.....

Deposit:

Parent is Parish Member: YES NO (name of parish).....

Enrollment declined: Reason declined:

Signature of School official: Position:

Date: 20.....