

SAINT KEVIN SCHOOL

39 Cathedral Road

Warwick, RI 02889

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School web site: [www.saintkevinschool.org](http://www.saintkevinschool.org)

Registration Form

PLEASE COMPLETE ONE PER FAMILY

PARENTAL INFORMATION

Father \_\_\_\_\_  
Last First

Address \_\_\_\_\_  
Street City State

Home Telephone # \_\_\_\_\_ E Mail Address \_\_\_\_\_  
Work Telephone # \_\_\_\_\_ Cell or Pager # \_\_\_\_\_  
Place of Employment \_\_\_\_\_ Occupation \_\_\_\_\_

Religion \_\_\_\_\_ Parish \_\_\_\_\_ If St. Kevin - Budget # \_\_\_\_\_

Mother \_\_\_\_\_  
Last First Maiden Name

Address \_\_\_\_\_  
Street City State

Home Telephone # \_\_\_\_\_ E Mail Address \_\_\_\_\_  
Work Telephone # \_\_\_\_\_ Cell or Pager # \_\_\_\_\_  
Place of Employment \_\_\_\_\_ Occupation \_\_\_\_\_

Religion \_\_\_\_\_ Parish \_\_\_\_\_ If St. Kevin - Budget # \_\_\_\_\_

Step-Parent (If applicable)

Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

Please give the following information (Optional)

\_\_\_ Father deceased \_\_\_ Mother deceased \_\_\_ Parents separated or divorced

If parents are separated or divorced, to whom should additional correspondence be sent?

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Home telephone \_\_\_\_\_ Email address \_\_\_\_\_