



## Prospective Family Inquiry

### Contact Information

Family Last Name	
Father Name	
Mother Name	
Street Address	
City and Zip Code	
Home Phone	
Cell Phone	
E-Mail Address	

### Child(ren)

Please list children who will be attending St. Elizabeth:

Name of Child	Grade 2024-2025

### How Did You Hear About St. Elizabeth?

\_\_\_ Current St. Elizabeth Family

\_\_\_ Friend/Family

\_\_\_ Social Media

\_\_\_ Newspaper

\_\_\_ Other:

\_\_\_\_\_

\_\_\_\_\_

### Office Use Only

_____	Date of School Tour
_____	Date of Follow-Up contact
_____	Date of Acceptance Letter
_____	Date Registered