

St. Elizabeth of the Trinity School Student Form

2025-26

COMPLETE A STUDENT FORM FOR EACH CHILD ENROLLING

Student Name _____ Male _____ Female _____ Grade level _____

Last First Middle 2024-2025

Student Lives With _____ Language Spoken At Home _____
state relationship

Please provide the names and ages of all children under the age of nineteen living in the household.

Birth Certificate

Date of Birth

Only government-issued birth certificates are acceptable.

Original certificate provided

Dates Sacraments Received (complete only if child is Catholic)

Date (mm/yy)

For Office Use Only

Certificate provided

Certificate provided

Certificate provided

Certificate provided

Family Record

Father's Name

Father's Ethnicity

Religion

Mother's Name

Maiden Name

Mother's Ethnicity

Religion

Parent/Guardian's Signature

Date

This form is due with the non-refundable registration fee (paid on FACTS) of \$200.

Updated 11/23/2025