## St. George Church School Family Registration 2023-2024



Family Name:						CUFTON W.	
Parent's Names:							
Parent's Names: Mother's Cell:							
Father's Email: Father's Cell:							
			Mother  Father				
Student's Full Name (li	st all)	Baptized Orthodo x Yes/No	Baptismal Name	Date of Birth	Age	Grade in School	
	* Only those child	 dren hantize	 ed in the Orthodox Faith ca	 on receive Holy Comm	union		
Does your child hav	e any allergies? Yes	s  Ne	o  If yes, please lis	st:			
Does your child hav	e any special needs th	nat we sho	uld be aware of? Yes	□ No □ If	yes, pleas	e explain:	
discuss details of spec	ific accommodations th	at may be r	to try and accommodate enecessary.	_		_	
•	-	-	**********	•			
			earning more about the				
			GOYA (grades 7-12) _				
******			**************************************		*****	******	
	Date Paid:		Check #:	Cash:			
	may be times when my	y child's ph	oto, taken within the cont ebook page of St. George	ext of a Church/Sund	ay School		
Parent's signature:					Date:		