

OUR LADY OF LOURDES CATHOLIC SCHOOL

2009–2010 STUDENT DIRECTORY FORM

THE INFORMATION PROVIDED ON THIS FORM WILL BE INCLUDED IN THE 2009–10 STUDENT DIRECTORY.
PLEASE OMIT ANY INFORMATION YOU DO NOT WANT PUBLISHED IN THE DIRECTORY.
RETURN THIS FORM ON THE FIRST DAY OF SCHOOL. *PLEASE PRINT LEGIBLY TO AVOID MISSPELLINGS*

STUDENT'S LAST NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

IS THIS A NEW ADDRESS FOR THE 2009-10 SCHOOL YEAR? YES ___ NO ___

MOTHER'S (OR GUARDIAN) NAME _____

STREET ADDRESS _____

CITY, STATE & ZIP _____

HOME PHONE _____ WORK PHONE _____

E-MAIL ADDRESS _____ CELL PHONE _____

FATHER'S (OR GUARDIAN) NAME _____

STREET ADDRESS _____

CITY, STATE & ZIP _____

HOME PHONE _____ WORK PHONE _____

E-MAIL ADDRESS _____ CELL PHONE _____

SIBLINGS ENROLLED AT OLOL FOR THE 2009-10 SCHOOL YEAR:

STUDENT FIRST NAME _____ GRADE _____

STUDENT FIRST NAME _____ GRADE _____

STUDENT FIRST NAME _____ GRADE _____

PARENT SIGNATURE _____

DATE _____