



Las Cruces Catholic Schools

FOR OFFICIAL USE ONLY	
Date:	_____
# of Students:	_____
Reg. Fee Paid:	_____
Cash: ___ CC ___ Ck#	_____
Received by:	_____

REGISTRATION FORM

This registration form is to secure your child's enrollment for the 2019/2020 school year. LCCS is currently in the process of implementing an on-line enrollment application. You will be notified once this becomes available. Additional information will be provided soon.

PLEASE PRINT

Student Name: _____ Grade(19-20): _____

Student Name: _____ Grade(19-20): _____

Student Name: _____ Grade(19-20): _____

Student Name: _____ Grade(19-20): _____

Parent/Guardian Name(s): _____

Phone # _____

Email: _____