



**RE-ENROLLMENT REGISTRATION FORM
2010-2011 SCHOOL YEAR**

Please complete this form and return to school by **February 19, 2010** along with the following items:

- ✓ 2010-11 Billing Agreement Form
- ✓ Check made payable to Guardian Angels School for the non-refundable Registration Fee of \$150 per family and payment for additional fees for PTA, Athletic Boosters and Music Boosters.

STUDENT'S NAME		GRADE FOR 2010-2011
First Name	Last Name	
First Name	Last Name	
First Name	Last Name	
First Name	Last Name	
First Name	Last Name	

_____ Yes, my children listed above will be returning to Guardian Angels School

_____ No, my children listed above will not be returning to Guardian Angels School

Parent/Guardian Signature: _____ Date: _____

Please list any NEW student you will be enrolling for 2010-2011. New Student registration forms are available in the office or on the GA website: <http://www.gaschool.org>

First Name	Last Name	Grade for 2009-2010
First Name	Last Name	Grade for 2009-2010