ANNUNCIATION GREEK ORTHODOX CATHEDRAL OF CHICAGO

GREEK SCHOOL

REGISTRATION FORM 2016-2017

STUDENT'S NAME:

| English | | | |
|--|------------|---------------------|----------------|
| Last | | First | |
| Greek | | | |
| Last | | First | |
| DATE OF BIRTH | | COUNTRY OF BIRTH | |
| FATHER'S NAME | | MOTHER'S NAME | |
| ADDRESS | | | |
| HOME PHONE | WORK PHONE | | CELLULAR PHONE |
| FATHER'S OCCUPATION | | MOTHER'S OCCUPATION | |
| Family email address: | | | |
| STEWARD OF ANNUNCIATION YES NO | | | |
| PROGRAMS (indicate the Grade of your child by circling the appropriate grade) | | | |

Saturday Program (10:30 am – 1:00 pm)

Kindergarten (5 YEARS OLD)

1st Grade 2nd Grade 3rd Grade

4th Grade 5th Grade 6th Grade

Please Note:

The Parent or legal guardian of the student(s) being registered must have pledged and paid in full their stewardship contribution (a minimum of \$600.00) for 2016 on or before the day of registration to receive the stewardship tuition rate for the academic year.