

OUR LADY OF PERPETUAL HELP SCHOOL

836 Dewitt Avenue • Clovis, CA 93612
Phone: (559) 299-7504 • Fax: (559) 299-4627
Website: www.olphschool.net

INFORMATION UPDATE FORM SCHOOL YEAR 2018-2019 (One Form per Family)

Date Completed: ____/____/____

INFORMATION FOR OLDEST STUDENT IN THE FAMILY:

FAMILY NAME: _____ Grade: _____ [] Male [] Female DOB: ____/____/____

STUDENT'S
NAME: _____ email _____
First Last

Address: _____ (____) _____ - _____
Number Street City/ ST/ Zip Home Telephone #

Student Lives With: [] Father & Mother [] Mother [] Father [] Mother & Stepfather [] Father & Stepmother
[] Other: _____

FATHER'S INFORMATION:

First Name: _____ Last Name: _____ [] Stepfather

Occupation: _____ Marital Status [] Married [] Separated [] Divorced [] Widower [] Single

Required Emergency Numbers: Work:(____)____-____ Cell:(____)____-____ email _____

Catholic: [] Yes [] No Parish: _____ Ethnicity: _____

MOTHER'S INFORMATION:

First Name: _____ Last Name: _____ [] Stepmother

Occupation: _____ Marital Status [] Married [] Separated [] Divorced [] Widow [] Single

Required Emergency Numbers: Work:(____)____-____ Cell:(____)____-____ email _____

Catholic: [] Yes [] No Parish: _____ Ethnicity: _____

SIBLINGS ATTENDING OLPH:

	Full Name	DOB	SSN	Gender (circle one)	Grade
1		/ /	- -	M F	
2		/ /	- -	M F	
3		/ /	- -	M F	