

Parent Name _____

Date _____

Student Name(s) _____

PLEASE COMPLETE AND RETURN TO THE SCHOOL OFFICE AFTER MAKING CHANGES ONLINE TO YOUR FASTDIRECT ACCOUNT

Parent Signature

Nativity of Our Lord Online Change Your Registration Form

Parent/Guardian #1 (where student resides) * required

*** Your primary data fields have been locked, please contact the school office to make changes.**

Name:*(Parent Name) Please contact the school office to make change.

Address:*(Primary Parent Address) Please contact the school office to make change.

Home Phone:*(*-***-****) Please contact the school office to make change.**

Work Phone: _____ Cell Phone: _____ Relationship: _____

Occupation: _____ Business Address, City, State, Zipcode: _____

Religion/Church: _____ E-Mail:(leave it blank if no email) _____

Parent/Guardian #2

Last Name: _____ First Name: _____ Initial: _____ Title: _____ Suffix: _____

Work Phone: _____ Cell Phone: _____ Relationship: _____

Occupation: _____ Business Address, City, State, Zipcode: _____

Religion/Church: _____ E-Mail:(leave it blank if no email) _____

___Check if address and home phone is the same as above for parent/guardian #2 and leave the next line blank.

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____

If either parent is deceased, please check box: Mother is deceased: _____ Father is deceased: _____

Other responsible persons ie. Emergency Contacts

(#3) Last Name: _____ First Name: _____ Title: _____ Relationship: _____

Phone: _____

(#4) Last Name: _____ First Name: _____ Title: _____ Relationship: _____

Phone: _____

Medical information:

Doctor's name: _____ Doctor's phone: _____ Hospital: _____ Insurance: _____

Publish phone (***-***-****) to Buzzbook: No / Yes (circle one)

Publish address (*****.): No / Yes (circle one)

Enter a ScreenName(10 char max): _____ and password(8 char max): _____