P.O. Box 1794, Cross Keys, Manchester

NEW STUDENTS REGISTRATION FORM

Attach photo

SECTION A

NAME: Russell (Surname) Johnoi (First Name) (Middle)

SEX: MALE (✓) FEMALE ( ) DATE OF BIRTH: Feb 7. 10

BIRTH CERTIFICATE PROVIDED: YES ( ) NO (✓) #. ON BIRTH CERTIFICATE: —

PRESENT ADDRESS: Grove Town Dist, C/Keys P.O.

DISTANCE FROM SCHOOL: ____ LAST SCHOOL ATTENDED: Grove Town Primary

DATE OF LEAVING LAST SCHOOL: July 22 GRADE ON LEAVING LAST SCH.: 6

Parent Email: PEP

SECTION B – FAMILY DATA

MOTHER'S NAME: Anna Kay Rice FATHER'S NAME: Joseph Russell

ADDRESS: S/A ADDRESS: Lancaster P.O. Woodstock Dist.

OCCUPATION: Entrepreneur OCCUPATION: Mechanic

TEL. #: 420-3213 TEL. #: 896-3523

GUARDIAN'S NAME: Kanai Thomas OCCUPATION: Student

ADDRESS: S/A (Cousin)

TEL.#: 784-1513

NO. OF BROTHERS: YOUNGER 1 OLDER: —

NO. OF SISTER: YOUNGER #1 OLDER: 2

DATE OF REGISTRATION: 17/8/22 DATE OF ADMISSION: 6/9/22

PARENT'S SIGNATURE: ____

SECTION C

FOR OFFICE USE ONLY

GRADE/CLASS PLACEMENT: 1F HOUSE: VENUS

PAYMENT OF FEES

SCHOOL FEE $____ AUXILIARY FEE . $ 10,550

INDICATE STUDENT'S STATUS (√)

MEDICAL COMPLETE (✓) INCOMPLETE ( )

DENTAL COMPLETE (✓) INCOMPLETE ( )

IMMUNIZATION CARD PROVIDED Yes ( ) No ( )

REGISTRATION OFFICER'S SIGNATURE: ____ DATE: 17/8/22