



2018-19 Application for New Students

Family Name

Please print neatly and return to the school ministry
 by fax at 530-350-3202, by email at hts@holytrinityparish.org, or
 by mail to 3115 Tierra de Dios Drive, El Dorado Hills, CA, 95762

Child Last Name	
Child First Name	
Child Date of Birth	
Grade in Fall 2018	
Last School Attended	

Child Resides With	<input type="checkbox"/> Both parents <input type="checkbox"/> Mother <input type="checkbox"/> Father
Father/Guardian Last/First Name	
Father/Guardian Email Address	
Residence Address	
Residence City/State/Zip	
Residence Phone	
Father Cell Phone	
Mother/Guardian Last/First Name	
Mother/Guardian Email Address	
Residence Address <i>(if different)</i>	
Residence City/ Zip <i>(if different)</i>	
Residence Phone <i>(if different)</i>	
Mother Cell Phone	

Please continue of the other side of this application.