

**St. Thomas More Family Information/Alumni Questionnaire**

Please fill in the information below and mail to: St. Thomas More School. 630 W. Ponce de Leon Ave., Decatur, GA 30030 or send via KidsMail.



Parent/s Name (Mother) \_\_\_\_\_

(Father) \_\_\_\_\_

Children(s) Name/Grade

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Address

(Mother) \_\_\_\_\_

\_\_\_\_\_

(Father) \_\_\_\_\_

\_\_\_\_\_

Home Telephone (M) \_\_\_\_\_ (F) \_\_\_\_\_

Work Telephone (M) \_\_\_\_\_ (F) \_\_\_\_\_

Business Name (M) \_\_\_\_\_

Business Address (M) \_\_\_\_\_

\_\_\_\_\_

Business Name (F) \_\_\_\_\_

(F) \_\_\_\_\_  
\_\_\_\_\_

**Grandparent Information**

Grandparent Name \_\_\_\_\_

Address \_\_\_\_\_

Grandparent Name \_\_\_\_\_

Address \_\_\_\_\_

Grandparent Name \_\_\_\_\_

Address \_\_\_\_\_

Grandparent Name \_\_\_\_\_

Address \_\_\_\_\_

Special Family Friend \_\_\_\_\_

Address \_\_\_\_\_

**Alumni Information**

Did you graduate from St. Thomas More?

(M) \_\_\_\_\_, what year \_\_\_\_\_

(F) \_\_\_\_\_, what year \_\_\_\_\_

Please give us the names and if available, addresses of any STM graduates you have contact with.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_