

# St. Anthony Preschool & Child Care Registration Form

A Ministry of St. Anthony Parish



PLEASE PRINT CLEARLY OR TYPE TO FILL IN ALL INFORMATION

## STUDENT INFORMATION

Date of Application \_\_\_\_\_

Child's given name (first, middle, last) \_\_\_\_\_

M \_\_\_\_\_ F \_\_\_\_\_ Start Date \_\_\_\_\_ Date of Birth or Due Date \_\_\_\_\_

Child resides with: Both Parents \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_ Other \_\_\_\_\_ Parishioner of St. Anthony Yes \_\_\_\_\_ No \_\_\_\_\_

If the child **DOES NOT** reside with both NATURAL/ADOPTIVE PARENTS, you will be asked to provide further information.

REGISTERING FOR: **(check one):** **Infant** (6 weeks - 12 mos) **Young Toddler** (12 - 24 mos)  
**Older Toddler** (25-36 mos) **Pre-School 3** (3 years) **Pre-School 4 & 5** (4-5 years)

## FAMILY INFORMATION

Last Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary Contact Phone \_\_\_\_\_

Email \_\_\_\_\_ School District in which the family resides \_\_\_\_\_

Is there any medical information which we should be aware? \_\_\_\_\_

Does your child require accommodations due to health, physical, social, cognitive and/or behavior needs? Yes \_\_\_\_\_ No \_\_\_\_\_

## PARENT INFORMATION (NATURAL or ADOPTIVE PARENTS INFO ONLY)

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Contact Email \_\_\_\_\_

Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Contact Email \_\_\_\_\_

## Registration Fees

Registration Fees are due at registration and are non refundable.

12 Month Students: \$150 per registering student.

10 Month Students: \$250 per registering student.

Office Use Only: Paid \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ Complete \_\_\_\_\_