

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's 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 _____

Is your child immunized with immunizations up to date? 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 _____