

Enrollment form will be accepted no sooner than February 4, 2020

INFORMATION RECEIVED

DATE: _____ TIME: _____

FAMILY NAME: _____

STUDENT INFORMATION

Child's Full Name: _____ Date of Birth: _____ (Age by August 1st)
(First Name, Middle Name, Last Name) 3 yrs. 4 yrs.

Baptism Date & Location: _____ Home Parish: _____

STUDENT PERSONALITY INFORMATION

Child's first name he/she should learn to write: _____ Child's hand preference: Right Left

Group activities your child attends or has attended in the last year (i.e., library story hour, Sunday School, swim lessons, daycare, etc):

Please list any information that will help make your child's experience at preschool more enjoyable (i.e., health or social difficulties, fears, likes or dislikes, etc.)

PROGRAM SELECTION

- | | | | | | |
|--|---|---|--|--|---|
| <input type="checkbox"/> M / W / F Class
7:30-10:30am | <input type="checkbox"/> M / W / F +
Enrichment
7:30-2:30pm | <input type="checkbox"/> M / W / F Class +
Enrichment + After School
Care 7:30-6:00pm | <input type="checkbox"/> M - F Class
7:30-10:30am | <input type="checkbox"/> M - F + Enrichment
7:30 - 2:30pm | <input type="checkbox"/> M - F + Enrichment
+ After School Care
7:30 - 6:00pm |
|--|---|---|--|--|---|

Only Mondays, Wednesdays & Fridays include class instructional time from 7:30-10:30am.

IN THE EVENT WE ARE ABLE TO SPLIT THE PRESCHOOL CLASS DUE TO SIZE, WHAT WOULD YOUR PREFERENCE BE:

- Morning Class Afternoon Class