

Saint Alphonsus School

PRE - K

PRE-K 2010-2011 Registration Form

**Please complete and return this form with \$175 Registration Fee.
Tuition for Pre-K is \$2,890.00**

Family Last Name _____

Home Phone Number _____

Street Address _____

City _____

Zip _____

Child(ren) enrolling in Pre-K for 2010-2011:

Office Use:

Check # _____

Amount _____

Date Recv'd _____

Number of Children _____ @ \$175.00 each = _____ **TOTAL DUE**

Parish Membership Status: (Please Check One)

_____ Sustaining Member of Parish (families that meet the Sunday offering requirement)

_____ Non-Parishioner and/or Non-Sustaining Member

Tuition Payment Options for 2010-2011 School Year: (Check One)

_____ Option One (Full Payment before July 1, 2010)

_____ Option Two (Two Payments through FACTS program)*

_____ Option Three (Ten Monthly Payments through FACTS program)*

*Instructions for the FACTS program will be mailed to your home.

Parent Signature _____ Date _____

Pre-K (2010-2011) Application Form

Circle:
Male or Female

Child's Last Name _____ First _____ Middle _____

Street Address _____ City _____ Zip _____ County _____

Date of Birth _____ Place of Birth _____
Month - Day - Year City - State - Country

Home Phone # _____ Public School District of Residence _____

Father's Full Name _____ Place of Birth _____
First Middle Last

Religion _____ Occupation _____

Father's Address (if different from child)

Street Address _____ City _____ State _____ Zip _____ Father's Home Phone # _____

Father's Work Phone # _____ Father's Cell Phone # _____

Mother's Full Name _____ Place of Birth _____
First Middle Maiden Last

Religion _____ Occupation _____

Mother's Address (if different from child)

Street Address _____ City _____ State _____ Zip _____ Mother's Home Phone # _____

Mother's Work Phone # _____ Mother's Cell Phone # _____

Family Status:

Number of older children _____ and/or younger children _____ in family.

Home Situation:

_____ Two Biological Parents _____ One Parent
_____ Mother/Stepfather _____ Parents Separated or Divorced
_____ Father/Stepmother _____ Other: Specify _____

If the child does not live with father or mother, please provide Guardian's information:

Name _____ Relationship to student _____

Address _____ Phone # _____

Religion _____ Country of Birth _____

- please turn page over -

St. Alphonsus Parish Membership Status: (please check one)

_____ Sustaining Member of Parish (families that meet the Sunday offering requirement)

_____ Non-Parishioner and Non-Sustaining Members (please complete below):

Parish Where Registered _____

_____ Non-Catholic

Baptism

Date of Baptism _____ Church _____

Church Address _____
Street City State Zip

Copy of Baptismal Certificate _____YES _____NO

Copy of Birth Certificate _____YES _____NO

Copy of Immunization Records _____YES _____NO