

**St. Patrick Catholic Preschool
New Family Registration
2023-2024**



**ST. PATRICK
PRESCHOOL**

This form is required only once per preschool family regardless of the number of children being registered.

PLEASE PRINT ALL INFORMATION

Revised: 12/6/22

CHILD'S NAME: _____

FAMILY INFORMATION

MOM

DAD

First Name: _____

First Name: _____

Middle Name: _____

Middle Name: _____

Last Name: _____

Last Name: _____

Address: _____

Address: _____

City, State, Zip: _____

City, State, Zip: _____

Home Phone/Work Phone: _____

Home Phone/Work Phone: _____

Cell Phone: _____

Cell Phone: _____

E-mail: _____

E-mail: _____

Occupation/Employer: _____

Occupation/Employer: _____

Religion: _____

Religion: _____

Marital Status: _____

Marital Status: _____

Maiden Name: _____

EMERGENCY BLAST INFORMATION

In the event that the school needs to send out an emergency blast, please provide **TWO** email addresses and **TWO** mobile numbers with mobile provider where you can be reached (Please include mobile provider):

Blast 1 email: _____

Blast 2 email: _____

Blast 1 mobile#: _____

Blast 2 mobile#: _____

Mobile provider: _____

Mobile provider: _____

PARENTS' HIGHEST DEGREE ATTAINED (Check One)

MOM: ____ High School ____ Associate ____ Bachelor's ____ Master's ____ Doctorate

DAD: ____ High School ____ Associate ____ Bachelor's ____ Master's ____ Doctorate

- Please note that Preschool registration is not complete until the student form, family form, birth certificate, and a **non-refundable deposit** is received by the Preschool Office during business hours.

Signature: _____ Date: _____

<i>For Office Use Only</i>			
Date Received: _____	Amount Paid: \$ _____	Cash: _____	Check Number _____
Date Entered: _____	Initials: _____	Comments: _____	