

# Pre-School Registration 2017 - 2018

## 2-YEAR OLD PROGRAM

\_\_\_ Two Day AM  
T/Th

\_\_\_ Two Day PM  
T/Th

## 3-YEAR OLD PROGRAM

\_\_\_ Three Day AM  
M/W/F

\_\_\_ Three Day PM  
M/W/F

## 4-YEAR OLD PROGRAM

\_\_\_ Five Day AM

\_\_\_ Five Day PM

\_\_\_ My child will be using extended care.

The following documentation is needed to complete registration: **Birth Certificate, Baptismal Certificate, Social Security Card, Current Record of Immunizations.**

There is a one-time, non-refundable \$50 processing fee for **new** families, along with a \$100 registration fee. The registration fee is deducted from your tuition total. If for any reason my child does not attend St. Jude Preschool, this will be considered a tax deductible donation.

**STUDENT'S NAME** \_\_\_\_\_ Male / Female

Address/City/Zip \_\_\_\_\_

Birth date \_\_\_\_\_ Birthplace \_\_\_\_\_

Religion \_\_\_\_\_ Social Security #XXX-XX-\_\_\_\_\_

### HOME SITUATION: (Check the situation that applies)

\_\_\_ Living with both parents

\_\_\_ Parents divorced-Living with mother \_\_\_\_\_ mother & stepfather

\_\_\_ Parents separated-Living with mother

\_\_\_ Parents divorced-Living with father \_\_\_\_\_ father & stepmother

\_\_\_ Parents separated-Living with father

\_\_\_ Living with guardians, who **are/ not** relatives

\_\_\_ Father deceased \_\_\_ Mother deceased

### MOTHER/STEPMOTHER

St. Jude Church Parishioner yes / **no\***

Name \_\_\_\_\_ Maiden \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Religion \_\_\_\_\_ Email \_\_\_\_\_

#### \*Parish/Church \_\_\_\_\_

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

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

### FATHER/STEPFATHER

St. Jude Church Parishioner yes / **no\***

Name \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Religion \_\_\_\_\_ Email \_\_\_\_\_

#### \*Parish/Church \_\_\_\_\_

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

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