

## St. Mary's Early Education Program Registration Application

CHILD'S NAME: \_\_\_\_\_  
Last
First
Middle

Name you want us to call your child: \_\_\_\_\_ SEX: M \_\_\_ F \_\_\_ BIRTHDATE: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ e-mail \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIPCODE \_\_\_\_\_  
 PHONE (\_\_\_\_) \_\_\_\_\_ CELL PHONE (\_\_\_\_) \_\_\_\_\_

INCLUDED IN SCHOOL DIRECTORY: \_\_\_\_\_ YES \_\_\_\_\_ NO  
 I GIVE PERMISSION FOR ANY PICTURES TAKEN OF MY CHILD THROUGHOUT THE SCHOOL YEAR TO  
 BE USED IN THE SCHOOL YEAR BOOK AND/OR ANY OTHER PUBLICATION USED AS AN  
 ADVERTISEMENT FOR THE SCHOOL. \_\_\_\_\_ YES \_\_\_\_\_ NO

FATHER'S NAME \_\_\_\_\_ MOTHER'S NAME \_\_\_\_\_  
 OCCUPATION \_\_\_\_\_ OCCUPATION \_\_\_\_\_  
 WORK PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
 RELIGION \_\_\_\_\_ RELIGION \_\_\_\_\_  
 PARISH \_\_\_\_\_ PARISH \_\_\_\_\_  
 VOLUNTEER WORK FOR PARISH \_\_\_\_\_  
 MARITAL STATUS: MARRIED \_\_\_\_\_ SEPARATED \_\_\_\_\_  
SINGLE \_\_\_\_\_ DIVORCED \_\_\_\_\_  
REMARRIED \_\_\_\_\_

**BROTHERS / SISTERS:**

NAME	AGE	SCHOOL	GRADE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**PICK-UP AUTHORIZATION: THE FOLLOWING ARE PERMITTED TO PICK UP MY CHILD. THE CHILD WILL BE RELEASED ONLY TO THOSE PERSONS LISTED BELOW. PLEASE BE SURE TO INCLUDE YOURSELF.**

name _____ relationship _____	name _____ relationship _____
name _____ relationship _____	name _____ relationship _____
name _____ relationship _____	name _____ relationship _____

SIGNATURE \_\_\_\_\_  
 PARENT OR GUARDIAN

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Office Use Only: AUTO DEBIT FORM RECEIVED \_\_\_\_\_ DATE: \_\_\_\_\_

Registration Fee: \$85.00  
 Check # \_\_\_\_\_ Cash \_\_\_\_\_  
 Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Tuition Payments: In full on 7/1/12 \_\_\_\_\_  
 Two payments, 7/1/12 & 11/1/12 \_\_\_\_\_  
 Check # \_\_\_\_\_ Received by: \_\_\_\_\_ Date(s) \_\_\_\_\_

