

## Our Lady of the Lake Catholic School 2024-2025

## Preschool – Pre Kindergarten Registration Form ☐ PreK 3 ☐ PreK 4

Child's First Name:	s First Name: Child's Last Name:	
Street Address:		Zip:
Male Female	Place of Birth	Date of Birth/
Contact Email:		Mom Dad
Mother's Name:	Ceil #:	Work#:
Father's Name:	Cell #:	Work #:
Mother's Employer:	r: Father's Employer:	
Parent's Marital Status:	Married Single Divorced	Separated
Are there any parental i	restrictions? Yes No If Yes, please explai	
	***We will need a copy of any court docume	nts concerning custody***
Religion:	Registered at Oui	Lady of the Lake Parish: Yes No
Ethnic background:	American Indian/Native Alaskan	Asian/Pacific Islander
_	African American	Hispanic
	Caucasian	Other
If v	ou are Catholic, then you must provide an original t	
Please note: \$50.00 Non-Refundable Registration Fee due with application.		
riesse note. 250.00 Non-Retundable Registration Fee due with application.		
The fee for Pre-School is \$ 700.00 per month which is due the first Monday of each month.		
Class placeme	nt is determined upon availability of space; you	ır child must be 3 years of age by 9/1/2024.
Child Must Be Toilet Trained.		
If there are repeated problems your child may be removed from program.		
Child's Doctor	Phone #	
Does your child have	any allergies? Yes No please list	
Does your child have	any physical restrictions? Yes No If	so what:
	pick up your child: (other than parents)	
Name	Relationship:	Phone#
Name	Relationship:	Phone#
Please list ONE Emergency Name & Phone Number: other than yourself		
Name	Relationship:	Phone#
Parents must have SE	p Hours: <u>Mandatory Volunteer Hours 30 hours p</u> IT training. SET has to be renewed each July. A o not complete the mandatory hours, you will be	
Parent Signature		Date
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