Seton
CATHOLIC SCHOOL
FAITH ◆ KNOWLEDGE ◆ DISCIPLINE

2010-2011

Preschool Playschool Registration

Please send a $30 registration fee along with this form.

STUDENT INFORMATION

Please Print

Student Name:_____ M F Birthday___/____/____
First Middle Last

Address:_____
Street City Zip

Family E-Mail:_____ Phone: (_____)_____

2010-2011 Preschool Class (check one): ____4 yr old ____ 3 yr old ____2 ½ yr old

Please indicate the days that you need playschool in each time slot below.

7:50 a.m. – 11:30 a.m.	____ Mon.	____Tues.	____Wed.	____Thurs.	____Fri.
10:50 a.m. – 2:30 p.m.	____ Mon.	____Tues.	____Wed.	____Thurs.	____Fri.
2:30 p.m. – 6:00 p.m.	____ Mon.	____Tues.	____Wed.	____Thurs.	____Fri.

Does your child have any allergies? _____

PARENT INFORMATION

Father's Name:_____
Work #:_____ Ext:_____ Cell #:_____

Mother's Name:_____
Work #:_____ Ext:_____ Cell #:_____

EMERGENCY / PICKUP INFORMATION

Emergency Contact: ____ _____ Phone: _____

Emergency Contact: ____ _____ Phone: _____

Pickup Contact: _____ Phone: _____

Pickup Contact:_____ Phone:_____

Office Use Only

Date Registered: _____ Registration Fee: _____Notes: _____