

ST. FRANCES CABRINI SCHOOL

529 W. HAWTHORN DRIVE WEST BEND, WI. 53095

4 YEAR OLD KINDERGARTEN REGISTRATION FORM

Name _____

SESSIONS: Indicate 1st and 2nd choice please! Sessions are 7:50-11:00 A.M.

	<u>Optional</u>
____ Monday/Wednesday A.M.	____ Friday A.M.
____ Tuesday/Thursday A.M.	____ Friday A.M.

\$1,100.00 for a two day per week session (subject to change) in 10 monthly payments

\$1,550.00 for a three day per week session (subject to change) in 10 monthly payments

* There is also a \$125.00 Book/Supply Fee

Each CLASS is strictly limited to a Minimum of 12 students and a Maximum of 18 students. Pupils MUST be 4 years old on or before September 1, 2012. NO exceptions will be made.

Registration Date - In person registration on **January 31st at 3:00 P.M.** in the K4 Room.

- I. During the registration period the following priorities will be followed:
 - a. Registered parishioners with children in school.
 - b. Registered parishioners without children in school
 - c. Non-parishioners with children in school. (Only after April 15, 2012)
 - d. Non-parishioners without children in school. (Only after April 15, 2012)
- II. Registration after February 15th and before July 1st will be based on a first come first serve basis and are subject to availability and these priorities:
 - a. Registered parish school families with children in school.
 - b. Registered parish families.
 - c. Non-parishioners with children in school. (Only after April 15, 2012)
 - d. Non-parishioners without children in school. (Only after April 15, 2012)
- III. Only after April 15, 2012 will non-parishioners without children in school, be eligible for available spaces.

YOU WILL NEED TO BRING THE FOLLOWING ITEMS TO IN-PERSON REGISTRATION:

Your child's: **IMMUNIZATION RECORD**
BAPTISMAL RECORD
BIRTH CERTIFICATE (for verification only)

***THERE IS A NON-REFUNDABLE REGISTRATION FEE OF \$100.00 (which will be applied to your Book/Supply Fee).**

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4 YEAR OLD KINDERGARTEN REGISTRATION FORM

Student's Full Name _____

Student's Date of Birth _____ M _____ F _____

Parents/Guardians Full Names _____

Complete Home Address _____

Phone - Home _____ Work _____

E-Mail _____ Cell Phone _____

Please check which category is applicable to your registration:

_____ Registered parishioners with children in school including current K4.

_____ Registered parishioners without children in school.

_____ Non-parishioners with children in school.

_____ Non-parishioners without children in school.