

St. Andrew's Preschool  
FALL AGREEMENT FORM  
2018-2019



Today's Date \_\_\_\_\_

Child's Name

\_\_\_\_\_  
Last First Middle Nickname

Class (Age Level) \_\_\_\_\_ Days \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_  
Month/Day/Year

Home Address \_\_\_\_\_  
Street/Apt.

\_\_\_\_\_  
City State Zip

Home Telephone \_\_\_\_\_

Mother's Name \_\_\_\_\_

Business Name & Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Father's Name \_\_\_\_\_

Business Name & Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Is there a second language spoken at home? Yes \_\_\_ No \_\_\_ Language? \_\_\_\_\_

List other children in the family. Please give name, age, and sex.

\_\_\_\_\_

List any food allergies: \_\_\_\_\_

The registration fee is due at the time of registration. I agree to pay one month's Tuition and the Activity Fee by May 7th. **The registration fee, activity fee and month's tuition are non-refundable.** This assures my child the preferred days in the appropriate class for the next school year. If I wish to forfeit my place, I must let the school know as soon as possible.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only:  
Reg. Fee \_\_\_\_\_ Activity Fee \_\_\_\_\_ Tuition \_\_\_\_\_ Total \_\_\_\_\_ Check # \_\_\_\_\_