St. Boniface Religious Education Pre-K and Kindergarten Registration 2011-2012

Tuesdays 4:15-5:30 Ann Marie Tassello, teacher
Katelyn Tassello, assistant teacher

Registration can be mailed or hand delivered. We must have at least 5 children to open this class. This is a free program for registered members of the parish.

Student Name (Last) _____ (First) _____
Sex: Male_____ Female_____

Address: _____
City _____
Phone: _____Cell phone: _____
Date of Birth: _____ Alternate cell phone: _____
Email address: _____

Mother's Maiden Name: _____
Father's Name: _____

Emergency contact: _____
Emergency Phone Number: _____
Doctor for Emergency: _____
Are there any medical or learning problems we should know about?
_____

This must be completed for Registration to be processed.

Baptism date: _____
Baptism church: _____
Address of church: _____
Copy of Baptismal Certificate, if your child was not baptized at St. Boniface.

In case of illness or accident, I request that the representative of the parish catechetical program contact me or my emergency contact. If we are unable to be reached, I hereby authorize this representative to call the physician indicated and to follow the physician's instructions. If it is impossible to contact this physician, the representative of the parish catechetical program may make whatever arrangements seem necessary. I agree to assume the financial responsibility for any diagnosis, treatment and /or medication deemed necessary. To the best of my knowledge all information given is accurate and complete. I hereby consent to, and authorize the necessary procedures that have been stated above.

Parent Signature: _____Date:_____