



187 Wyckoff Avenue
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**LITTLE SHEPHERD PRE-K 3 YEAR OLD
 REGISTRATION FORM – 2019/20**

SESSION: Monday-Friday – 8:30 am to 11:00 am (5 half days) _____
 Monday-Friday – 8:30 am to 2:30 pm (5 full days) _____
 Monday, Wednesday, Friday – 8:30 am to 11:00 am (3 half days) _____
 Monday, Wednesday, Friday – 8:30 am to 2:30 pm (3 full days) _____

STUDENT INFORMATION:

Student Name: _____
 Last First Middle
 Address: _____
 Home Phone: _____
 Sex: _____ Male _____ Female
 Date of Birth: _____ (Must be 3 before October 1.)
 (Birth Certificate Required) Place of Birth _____
 I certify that my child is toilet trained. _____ Yes _____ No

PARENT INFORMATION:

Marital Status: _____ Married _____ Divorced _____ Single _____ Widowed
Father's Name: _____ Religion: _____
 (Last) (First)
 Address: _____
 Occupation: _____ Employer: _____
 Email Address : _____ Cell Phone: _____
Mother's Name : _____ Religion: _____
 (Last) (Maiden) (First)
 Address: _____
 Email Address: _____ Cell Phone: _____
 Occupation: _____ Employer:: _____
 Number of Children in Family: _____ Boys _____ Girls _____ Number attending St. Paul's _____
 Parish Affiliation: _____ Non-Parishioner: _____

CENSUS INFORMATION:

Child's Ethnic Heritage: ___ Asian ___ Black ___ Hispanic ___ Multi-Racial ___ White
 ___ Native Alaskan/American Indian
 ___ Native Hawaiian/Pacific Islander

Baptized: Yes _____ No _____
 If baptized, certificate is required.

Please submit form with \$250 registration fee (per child) and \$50 PFG fee (per family). A completed health form must be submitted by August 1 before entrance to school.

Checklist for Submission:

Application Form _____
 Registration Fee _____
(Non Refundable)
 Birth Certificate _____
 Baptismal Certificate _____
 Health Form* _____