



# Saint James the Greater

## SUNDAY PRESCHOOL REGISTRATION

*Please return completed forms to Religious Education in the Parish Center.*

Family Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code \_\_\_\_\_

Father's First Name: \_\_\_\_\_ Mother's: \_\_\_\_\_

Email Address #1: \_\_\_\_\_ Email Address #2: \_\_\_\_\_

Are you a registered member of St. James Parish? Yes \_\_\_\_\_ No \_\_\_\_\_

Student Name \_\_\_\_\_ Birth Date: \_\_\_\_\_

Current Grade: \_\_\_\_\_ School Student Attends: \_\_\_\_\_

Does your child have any special needs\*? Yes \_\_\_\_\_ No \_\_\_\_\_

[\*i.e., food allergies, visual, speech, hearing, learning, other physical, and/or mental challenge(s)]  
Please provide specific information on this sheet to enable the teacher to better serve the needs of your child. All information given will be treated as confidential, and shared only on a need-to-know basis.

\_\_\_\_\_  
\_\_\_\_\_

**FEE - \$40.00 per student [Add \$5.00 after 17 August 2018.]**

If you are interested in assisting with the PSR program, please check the appropriate lines:

Teacher \_\_\_\_\_ Substitute Teacher \_\_\_\_\_ Teacher's Aide \_\_\_\_\_

\*\*\*\*\*

Office use only:

PDS \_\_\_\_\_ Date: \_\_\_\_\_ Registration Fee: \_\_\_\_\_ Check #: \_\_\_\_\_ Cash: \_\_\_\_\_

\*\*\*\*\*

*Please contact the Religious Education Office (513.741.5335) to discuss payment options.*