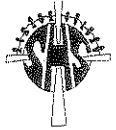


Preschool Registration

St. Hubert School



Student's Name _____ Date of Birth _____

Two Day Program

(Three years old by August 31 with independent bathroom skills)

_____ Tuesday/Thursday 9:15-11:45 Tuition: \$160/month

Three Day Program

(Four years old by October 31st)

_____ Monday/Wednesday/Friday 9:15-11:45 Tuition \$240/month

Four Day Program

(Four years old by October 31st)

_____ Monday-Thursday 1:00-3:30 Tuition \$320/month

M or F Religion _____ Place of Baptism _____

Student's Address _____ City _____ Zip _____

Student's Home Phone (____) _____ Resident of _____ School District _____

Ethnicity (optional)

___ African American, ___ Asian, ___ Caucasian, ___ Hispanic, ___ Native American, ___ Other _____

Father's Information:

Name _____ E-mail: Work _____ Home _____

Address _____

Home Phone Number (____) _____ Work Phone Number (____) _____

Cell Number (____) _____ Place of Employment _____

Mother's Information:

Name _____ E-mail: Work _____ Home _____

Address _____

Home Phone Number (____) _____ Work Phone Number (____) _____

Cell Number (____) _____ Place of Employment _____

Child Resides with: ___ Both Parents ___ Mother ___ Father ___ Other

Names and Grades of Siblings currently attending St. Hubert School:

Members of St. Hubert Parish? YES or NO

If no, members of what parish? _____

\$75 Non-Refundable Annual "Family Registration Fee" must accompany this form.