

GESU SCHOOL * PRE-K * REGISTRATION FORM



STUDENT INFORMATION

Child's Name: _____
Last First Middle Initial

Date of Birth: _____ Place of Birth: _____ Gender: _____

Religion: _____

EMERGENCY CONTACT: Name / Relationship: _____ Phone: _____

Primary Parent(s) / Guardian Information

MOTHER / Legal Guardian (please circle)

Name: _____

Primary Phone: _____ Alt. Phone: _____

Street Address / City / ZIP: _____ E-MAIL: _____

Employer: _____ Work Phone: _____

Marital Status: Married, Divorced, Single Parent, Widowed (please circle)

Registered Member of GESU PARISH: _____ Y/N

FATHER/ Legal Guardian

NAME: _____

Primary Phone: _____ Alt. Phone: _____

Street Address / City / ZIP: _____ E-MAIL: _____

Employer: _____ Work Phone: _____

Marital Status: Married, Divorced, Single Parent, Widowed (please circle)

Registered Member of GESU PARISH: _____ Y/N

NON-CUSTODIAL PARENT

Are there any legal restrictions against non-custodial parent regarding these children? _____ (Y/N)

Please Select Program Enrollment Preference

☐ 5 Full Days / M-F 8-2:30

☐ 3 Full Days / M,T, THR 8-2:30

☐ 5 Days Part-time / M-F 8-11:45

ADDITIONAL INFORMATION

Does this child have a sibling currently enrolled at GESU Elementary? _____ Y / N

If so, please list names: _____

ETHNIC BACKGROUND / ETHNIC SURVEY

Is the student being enrolled a U.S. Citizen? _____ (Y / N)

What race is the student being enrolled? (Check appropriate group)

Caucasian _____ African American _____ Hispanic / Latino _____ Native Indian _____ Asian _____ Bi-racial _____

**Signed REGISTRATION FORM and ALL FEES
must be returned to the
school office by April 30, 2018**

**"In order to maintain our Catholic Identity
refusal to participate in our religious curriculum
may lead to discipline action including dismissal from our school."**

I agree to the terms and conditions set forth in the Gesu School 2018-2019 Tuition Policy.

Signature of Financially Responsible Party: _____ DATE _____

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FOR OFFICE USE ONLY

Registration Form Received: Date _____

<u>Payment</u>	<u>Date Rec'd</u>	<u>Check / Cash</u>	<u>CC</u>	<u>Amount</u>
Registration Fee:	_____	_____	_____	_____
Financial Fee:	_____	_____	_____	_____
Birth Certificate:	_____	_____	_____	_____