



Ascension

Preschool Registration Form

To enroll your child in the Ascension preschool program, complete this form and return along with the non-refundable registration fee.

 Childs Full Name

 Birth Date

 Religion/ Parish Membership

Male () OR Female ()

 Parent Name

 Parent Name

 Address ZIP

 Address ZIP

 Home Phone Cell Phone

 Home Phone Cell Phone

 email Address

 email Address

Attendance: _____ **Full Time** _____ **3 days/week** _____ **Mornings only**

*Please note priority is given to those students seeking full-time placement.

REGISTRATION FEE: \$150.00 PER CHILD (NONREFUNDABLE)

***Please read and check the appropriate line:**

_____ I am registering my child for Three's Preschool; please use my FACTS account on file.

_____ I am registering my child for Three's Preschool; I have attached a check for the registration fee.

_____ I am registering my child for Junior Kindergarten; please use my FACTS account on file.

_____ I am registering my child for Three's Preschool; I have attached a check for the registration fee.

 PARENT SIGNATURE

 Date

***Note: You will receive additional paperwork prior to the August Orientation Meeting to complete & return.**

Office Use Only: Amount Paid _____

Date Paid _____

Check/Batch _____