

KCSS PRESCHOOL / PREKINDERGARTEN PARENT NAME (S) _____
REGISTRATION FOR THE SCHOOL YEAR Last Name First Name
2008 - 2009

OFFICE USE ONLY

Reg. Fee Paid _____ Date _____
 Check No. _____ Cash _____

PLEASE INCLUDE A COPY OF YOUR CHILD'S BIRTH CERTIFICATE WITH NONREFUNDABLE REGISTRATION FEE OF \$25.00 / STUDENT.
 Pre K (4 & 5 year olds) are eligible for bussing.
 Preschool (3 & 4 year olds) are not eligible for bussing.

SECTION ONE: PARENTS/GUARDIAN INFORMATION

Salutation: Mr. ____ Dr. ____ Other _____
 Father's Name: _____
 Address: _____
 City: _____ Zip: _____
 Home Phone: _____
 Father's Religion: _____
 Employment: _____
 Work Phone: _____
 Cell Phone (if applicable): _____
 E-mail Address (if applicable): _____
 Occupation: _____
 School District: Kaukauna _____ Other _____
 Child(ren) lives with: Mother _____ Father _____ Both _____ Other _____

Mrs. ____ Ms. ____ Dr. ____ Other _____
 Mother's Name: _____
 Address: _____
 City: _____ Zip: _____
 Home Phone: _____
 Mother's Religion: _____
 Employment: _____
 Work Phone: _____
 Cell Phone (if applicable): _____
 E-mail Address (if applicable): _____
 Occupation: _____
 Will use District bus service: yes _____ no _____

STUDENT 1

SECTION TWO

STUDENT 2

Name: _____ M / F
 Birthdate: _____

Name: _____ M / F
 Birthdate: _____

Preschool Sessions* (3 & 4 year olds)**
 _____ Tues./Thurs. AM ONLY 8:10 - 10:55 AM
 _____ Mon./Wed. AM ONLY 8:10 - 10:55 AM
 _____ Tues./Thurs. PM ONLY 12:10 - 2:55 PM

Prekindergarten Sessions* (4 & 5 year olds)**
 _____ Tues./Wed./Thurs. AM 8:10 - 10:55 AM
 _____ Tues./Wed./Thurs. PM 12:10 - 2:55 PM
 _____ Fri. AM (Added Fourth Session) 8:10 - 10:55 AM
 _____ Fri. PM (Added Fourth Session) 12:10 - 2:55 PM

*****SESSIONS WILL BE HELD IF ENROLLMENT WARRANTS IT.**

SECTION THREE: TUITION & PAYMENT PLAN

1 Weekly Session per school year	\$510.00	I will pay: (check one)
2 Weekly Sessions per school year	\$775.00	_____ In Advance
3 Weekly Sessions per school year	\$990.00	_____ Monthly: 10 Payments 8/15- 5/15
4 Weekly Sessions per school year	\$1160.00	

(CHECKS ARE MADE PAYABLE TO KAUKAUNA CATHOLIC SCHOOL SYSTEM)

\$25.00 Registration Fee is applied to tuition. (non-refundable)
 Please sign below to state that you agree with the above mentioned payment terms.

Parent/Guardian Signature _____

Date _____

Thank you.