Please print clearly and fill in all fields.

4th Grade

Indicate scheduling preference by numerical order. If no preference is given, we will choose for you. More than one option must be chosen.

_____Monday 4:45PM-6PM _____Tuesday 4:45PM-6PM _____Wednesday 4:45PM-6PM

_____Tuesday 6:30PM-7:45PM

Office Use Only:

Tuition due: $_____

Tuition paid: $_____

Balance due: $_____

Child's Name: _____ _____ _____
Last **First** **Middle**

Sex (circle): Male Female **Birthdate:** _____
month date year

Mailing Address: _____ **NJ**_____
Street **Town** **Zip**

Home Phone: _____ **Family Email:** _____

Emergency Contact: _____
Name **Relation** **Phone #**

Special Needs: allergies, medical, learning disabilities, physical disabilities: _____

_____

Mom: _____ **Work Phone:** _____**Cell:** _____

Dad: _____ **Work Phone:** _____ **Cell:** _____

Custodial Parent or Guardian, if different from above:_____
Last **First**

<u>Baptismal Record:</u> For children in first grade or new to our program, you must supply us with a copy of your child's baptismal certificate OR
If your child was baptized *<u>in our parish</u>* the *approximate* date of baptism was_____
month date year

<u>Families of multiples:</u> Our parish policy is to separate multiple children in the same grade level into separate classes meeting on the same day/time. If you would prefer that your children be kept together in the same class, please circle here: KEEP CHILDREN TOGETHER

<u>Photo Release</u>: I hereby release the Diocese of Metuchen and its trustees, officers, employees, agents, legal representatives and assigns from any and all claims, actions and liability of whatever nature and relating to the use of said photograph(s) and/or video(s).

_____
Print Name **Signature**

List all siblings wishing to be placed on the same schedule: **Grade Level**
Names: **Fall 2021**

_____ _____

_____ _____