



Holy Family Catholic School

Family Registration for Early Education Center 2009/2010

5125 S. Apopka-Vineland Rd., Orlando, FL 32819 407/876-3943 FAX 407/876-1167

Today's Date \_\_\_\_\_

Last Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Father's First Name: \_\_\_\_\_ Father's Wk Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Mother's First Name: \_\_\_\_\_ Mother's Wk Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Parish: \_\_\_\_\_ How Long? \_\_\_\_\_ Father's Religion: \_\_\_\_\_ Mother's Religion: \_\_\_\_\_

Student Enrollment

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Male Female (circle one)

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Male Female (circle one)

(Child must be appropriate age by September 1 and MUST be potty trained to participate in the EEC Program..)

Please select one of the following:

3 Year Old Program

(Indicate preference 1 or 2)

4 Year Old Program

My plans for the 2010-2011 School Year are:

(Please make a selection)

- \_\_\_\_\_ 2 days (Mon/Wed) \_\_\_\_\_ 3 days (Mon/Wed/Fri) \_\_\_\_\_ Continue in the PreK 4 half day at EEC
\_\_\_\_\_ 3 days (Mon/Wed/Fri) \_\_\_\_\_ Enroll in the PreK 4 full day at HFCS
\_\_\_\_\_ Enroll in Kindergarten at HFCS
\_\_\_\_\_ Attend other school (public/private)

Please note: Entrance depends on criteria and availability of seating.

Table with 2 columns: Names of siblings "currently" enrolled in Holy Family School, Grade 08/09

Please complete the following questions:

- ~ Are you an active parishioner who attends weekly Mass, and supports through the use of "Stewardship of Treasure" envelopes? Yes No Envelope #
~ Are there any extenuating circumstances that need to be taken into consideration in this application? If "yes", please explain on backside of this form.

Checks payable to Holy Family School

I understand that the application fee of \$25.00 is NOT refundable and that payment of this application fee does not guarantee admission into the Early Education Center. I understand that upon acceptance, the \$175 registration fee balance is due and is non-refundable.

Parent/Guardian Signature:

Date:

For school use only

Date Application fee received Amount Paid Check # Registrar