

St. Catherine of Siena Preschool - Early Childhood Education Center
317 Witmer Road – Horsham, PA 19044
REGISTRATION APPLICATION

Saint Catherine of Siena Preschool offers an educational program and employment in a nondiscriminatory manner, without regard to race, sex, color, national origin, ancestry, religious creed, disability, and age.

Grade in September 2021 _____ 3 yr. old class _____ 4 yr. old class

5 days: Full ____ 8:30-2:30 Half ____ 8:30-11:30

3 days: Full ____ 8:30-2:30 Half ____ 8:30-11:30

PLEASE PRINT CLEARLY

Child's Last Name First Middle Male ____ Female ____

Street Address City/Town Zip County

Date of Birth _____ Country of Birth _____

Home Phone # _____ Public School District of Residence _____

Email address for Directory and School Communication _____ @ _____

Father's Full Name _____ Place of Birth _____
 First Middle Last

Religion _____ Place of Employment _____ Occupation _____

Father's Home Address (if different from student)

Street Address City PA Zip Father's Home Phone # _____

Father's Work # _____ Father's Cell # _____

Mother's Full name _____ Place of Birth _____
 First Middle Last

Religion _____ Place of Employment _____ Occupation _____

Mother's Home Address (if different from student)

Street Address City PA Zip Mother's Home Phone # _____

Mother's Work # _____ Mother's Cell # _____

Home Situation (Check all that apply):

____ Two Biological Parents ____ One Parent

____ Parents Separated or Divorced ____ Other: Specify _____

Languages spoken at home _____ Child's Primary Language _____

Student Background: (Check all that apply or no restrictions)

____ Allergies ____ EpiPen ____ Completed Educational Evaluation

____ Individual Educ. Plan. (IEP) (Please provide before entering program)

____ Medical concerns: _____ Dietary Needs: _____

____ Has no food restrictions or allergies

Previous school attended _____

Parish Membership IF CATHOLIC (Check appropriate box):

____ Registered member of St. Catherine of Siena

____ Registered at Other Parish: _____

____ Non-Catholic It is not a requirement to be Catholic for your child to attend our program.

TO THE BEST OF MY KNOWLEDGE, I CERTIFY THAT ALL INFORMATION PROVIDED ON THIS FORM IS ACCURATE.

Parent/Guardian Signature

Date _____

Parent/Guardian Signature

Date _____

Any other pertinent information/comments:

For Office use:

Tour date: _____

Enrollment Date: _____

Periodic review _____ Date: _____

Withdrawal Date: _____

_____ Date: _____

Reg Fee PAID: Check # _____ Cash _____

Registration: CARES _____