

**St. Elizabeth Ann Seton Parish**  
**REGISTRATION FORM – PARISH RELIGION PROGRAM (PRP)**

2012 – 2013

**PRESCHOOL PRP (Ages 3 Years - Kindergarten)**

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

Family Name \_\_\_\_\_ Returning Family \_\_\_\_\_ New Family \_\_\_\_\_

Are you a currently registered parishioner of St. Elizabeth Ann Seton Parish? Yes \_\_\_\_\_ No \_\_\_\_\_

If "No" please register at the Parish Office. You **must** be a member to enroll in the PRP program.

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Email: \_\_\_\_\_

Father's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

Religion \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

Religion \_\_\_\_\_

Registered child/children live with: Father and Mother \_\_\_\_\_  
Father \_\_\_\_\_ Mother \_\_\_\_\_ Grandparent \_\_\_\_\_ Other \_\_\_\_\_  
Shared custody will affect attendance \_\_\_\_\_  
Additional Phone Number \_\_\_\_\_

**Registration Form due July 15, 2012** † **Classes begin Sunday, September 9, 2012**

**Fees:**

\$ 70.00 one child

\$ 120.00 two children

(Family maximum \$250.00 for children in Preschool and Elementary Program)

**Payment:**

\_\_\_\_\_ Pay in Full at time of registration

\_\_\_\_\_ I would like to discuss financial aid/payment plan

\_\_\_\_\_ Teacher Waiver

**Payment is due at the time of registration**

Unless other arrangements have been made and approved by the Parish Staff.

All returned checks will be assessed for bank fees incurred

**Late Fee: \$ 25.00 on returning student registrations after July 15, 2012**

~ Late registration accepted only as space allows ~

Fill out this form, attach cash or a check made payable to: **St. Elizabeth Ann Seton Parish**, return it to the PRP office, drop it in the collection basket, or mail to parish office:

St. Elizabeth Ann Seton  
5890 Buckwheat Road  
Milford, OH 45150

**Office Information Only:**

Date \_\_\_\_\_ Amount of Payment received \_\_\_\_\_ Check No. \_\_\_\_\_

Paid By Cash \_\_\_\_\_ Received by \_\_\_\_\_ Comments \_\_\_\_\_

# STUDENT REGISTRATION FORM - Parish Religion Program (PRP)

## PRP Preschool Student Information

2012 - 2013

Please indicate which class you desire for your child:



PRP Preschool classes meet Sunday morning from 9:00 am – 10:00 am during the school year.



**3 year old class** (3 – 4 year olds)

**4 year old class** (4 – 5 year olds)

**Kindergarten** (5 -6 year olds)

**FAMILY NAME** \_\_\_\_\_

<b>Child's Name:</b> _____	M/F (circle)	Age _____ (as of 9/12)	Class choice _____
Date of Birth: _____		Preschool attending: _____	
Health/allergy concerns with this child: _____			
Learning disability or other concerns: _____			
<b>Baptism date:</b> _____	Place: _____	Parish _____	Location _____

<b>Child's Name:</b> _____	M/F (circle)	Age _____ (as of 9/12)	Class choice _____
Date of Birth: _____		Preschool attending: _____	
Health/allergy concerns with this child: _____			
Learning disability or other concerns: _____			
<b>Baptism date:</b> _____	Place _____	Parish _____	Location _____

<b>Child's Name:</b> _____	M/F (circle)	Age _____ (as of 9/12)	Class choice _____
Date of Birth: _____		Preschool attending: _____	
Health/allergy concerns with this child: _____			
Learning disability or other concerns: _____			
<b>Baptism date:</b> _____	Place _____	Parish _____	Location _____