

Child: \_\_\_\_\_

# Risen Savior Preschool

## 2011-2012 School Year

**Butterflies-AM**

**4-5 Year Olds**  
(Child must be 4 by Sept. 1)

Session #1- M/W/F AM

\_\_\_\_\_ 8:30 - 11:30 AM ~ \$130/month

**Butterflies-PM**

**4-5 Year Olds**  
(Child must be 4 by Sept. 1)

Session #2-M/W/F PM

\_\_\_\_\_ 12:00 – 3:00 PM ~ \$130/month

OR

Session #3-T/TH PM

\_\_\_\_\_ 12:00 – 3:00 PM ~ \$95/month

*\*New Session to be offered pending interest & approval by Parish Council*

**Caterpillars-AM**

**3-4 Year Olds**  
(Child must be 3 by Sept. 1)

Session #4- T/TH AM

\_\_\_\_\_ 8:30 – 11:30 AM ~ \$95/month

**\*POTENTIAL NEW OFFERING\***

**Frogs-PM**

**5 Year Olds**  
(Child must be 5 by Sept. 1)

CHECK THIS BOX FOR MORE INFORMATION ON THIS SESSION AS IT BECOMES AVAILABLE.

Session #5-M/T/W/TH/F PM

\_\_\_\_\_ 12:00 – 3:00 PM ~ \$ TBD

*\*To be offered based on interest and pending final approval by Parish Council*

\$25 Deposit required at time of registration.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

# Risen Savior Preschool

## Information Sheet

(Please Print)

### Office Use:

Reg. fee Paid: \_\_\_\_\_

Check # \_\_\_\_\_

Date: \_\_\_\_\_

Please register my child for:

**July 3-day Preschool Preview Day Camp ONLY** \*Enclose \$15 camp fee

**Fall 2011-2012 Preschool** (Select session desired on front.) \*Enclose \$25 registration fee

**BOTH Preschool Preview Day Camp & Fall 2011-2012** \*Enclose \$25 registration fee

Child's Full Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birthday: \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Mother's Name: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mother's Cell Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father's Cell Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Names and Ages of Brothers and Sisters: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Day Care Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergies or other issues that might affect school (phobias, behavior, toileting, etc.):

\_\_\_\_\_  
\_\_\_\_\_

Risen Savior Parish Member: Yes \_\_\_\_\_ No \_\_\_\_\_

Member of Other Parish/Denomination: \_\_\_\_\_

We will be transporting our child to/from preschool.

We will call the City of Brandon to arrange/reserve a seat on the bus  
(Spaces are available to families/individuals on a first come, first served basis.)