2021 - 2022 REGISTRATION

St. Peter's Child Development Center

(please print)		
Child's Name		
(Last)	(First)	(MI)
•		_
Birthdate/Anticipated Birthdo	ateAge as of Sept.1	,,2021
Gender: FemaleMale	School last attended	
Mailing Address		
Parents or Guardians:		
Mother's Name□ Mrs. □ Ms.	□ Dr	
Name Mother is known by		
Place of Employment	Work #	Cell #
Email		
O		
Father's Name \square Mr. \square Dr		
Name Father is known by		
Place of Employment	Work #	Cell #
Occupation		
Marital Status of Parents	If divorced, who has cus	stody?
Person Responsible for Tuition	1	
Siblings name & age		
Name of siblings & school att	ending	
Are you a registered, contrib	uting member of St. Peters Churc	:h?YesNo
Registered parishioner of ano	ther Catholic parish?Yes	No
Name of Parish		
Other		
How did you hear about us?		
Parent/Guardian Signature		Date
\$155 Registration	n Fee (annual; non-	refundable)
For Registrar's Use Only:		
Registration Fee: Date Rec'd:	Check No: Parish Verificatio	n Form:
Infant Class 1 Year Old Clas	ss 2 Year Old Class 3 Year Old Cl	lass 4 Year Old Class