

St. Alban's Preschool
3738 N. Old Sabino Canyon Road Tucson, AZ 85750 * 520-296-2043 *albanspk@stalbansaz.org
Registration Form 2026-2027

Child's Name _____ DOB _____
First _____ Middle _____ Last _____

Home Address _____ Zip _____

Parent/Guardian _____ Parent/Guardian _____

Address _____ Address _____
(if different than above) (if different than above)

Email _____ Email _____

Ph #1 type: _____ # _____ Ph #1 type: _____ # _____

Ph #2 type: _____ # _____ Ph #2 type: _____ # _____

My child will attend the following program:

Preschool (PS) 9:00 – 12:00, Full Day (FD) 6 hours that include 9 – 12, Extended Day (ED) 6 + hours

	Monday	Tuesday	Wednesday	Thursday	Friday
Arrival Time					
Departure Time					

I understand that the registration fee and the supply fee are required and non-refundable. Initial: _____

New Student Registration Fee: \$75.00 Continuing Student Registration Fee: \$50.00 Supply Fee: \$85.00

I give permission for staff to apply sunscreen/bug spray (provided by parents) on my child. _____

I give my child permission to go to the chapel, library and to rooms 11/12 for activities. _____

I give permission for staff to use Kirkland wipes on my child. _____

I give permission for my child's photo to be used on:

Facebook _____ School Website _____ Lillio (parent communication app) _____

