

EMERGENCY CONTACT PERSONS:

Name

Number

1. _____

2. _____

3. _____

Registration Requirements:

1. Copy of birth certificate
2. Updated immunization record
3. \$50 registration fee

I consent to the enrollment of the child listed above in St. Therese Nursery School for the upcoming year.

I agree, in case of emergency, that when I or the designated person cannot be reached, first aid treatment may be given on premises.

Parent/Guardian Signature

BC _____

IMM. _____

REG. FEE _____