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785 FRANKLIN LAKE ROAD
FRANKLIN LAKES, NEW JERSEY 07417
(P) 201.891.4250
(F) 201.847.9227
www.mbs4u.ws

REGISTRATION APPLICATION for 2011-2012
Little Blessings Pre K 4

STUDENT INFORMATION

(Please print)

Name: (last)

(last)

(first)

Address:

Phone:

Date of Birth: Place of Birth: Sex: Male__Female__

Previous School Name: (if any) Address:

Date: _____

\$300 Registration Fee
*Registration fees are NON-REFUNDABLE
Birth Certificate
Baptismal Certificate

Ck# _____

CENSUS INFORMATION

Child (ren)'s Ethnic Heritage: Asian__ Black__ Hispanic__ Multi-Racial__ White__
Native Alaskan/American Indian__ Native Hawaiian/Pacific Islander__
Child (ren)'s Religion:

SCHEDULE SELECTION

Monday thru Friday full days 8:50 am to 3:00 pm (1st preference given)
Monday, Wednesday, Thursday full days 8:50 am to 3:00 pm (if space is available)
Monday thru Friday mornings 8:50 am to 11:30 am (if space is available)

Please Note:

*Lunch Bunch is optional for 1/2 day sessions (11:30-12:30) at an additional small fee. It is a "bring your own lunch" program with supervised play. Uniforms will be worn in Pre K.

FAMILY INFORMATION (Please print)

Marital Status: Married__ Divorced__ Single__ Widowed

Father: Name: (first) (last) if different from student

Address: (if different from above)

Occupation: Religion:

Mother: Name: (first) (Maiden) (last) if different from student

Address: (if different from above)

Occupation: Religion:

PARISH AFFILIATION: Are you a registered member of Most Blessed Sacrament Parish? Yes__ No__

If not, please provide the Name and Address of your Parish/Church

* If child was Baptized at Most Blessed Sacrament, a Baptismal Certificate is not needed, However, please provide the DATE of the child's Baptism

BEFORE ENTERANCE into school a completed Health Form must be submitted to the Nurse by 9/1/11