



Name and address of parent(s) /guardian responsible for tuition payments:

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

Name and address of parent(s)/guardian applicant is living with:

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

Father's Employer \_\_\_\_\_ Title \_\_\_\_\_  
Occupation \_\_\_\_\_ Phone # \_\_\_\_\_  
Employer's Address \_\_\_\_\_ E-mail \_\_\_\_\_  
\_\_\_\_\_

Mother's Employer \_\_\_\_\_ Title \_\_\_\_\_  
Occupation \_\_\_\_\_ Phone # \_\_\_\_\_  
Employer's Address \_\_\_\_\_ E-mail \_\_\_\_\_  
\_\_\_\_\_

Please check the following that applies to your child:

**Living with:**

\_\_\_\_\_ Father \_\_\_\_\_ Both Parents  
\_\_\_\_\_ Mother \_\_\_\_\_ Guardian  
\_\_\_\_\_ Fosterparent \_\_\_\_\_ Other \_\_\_\_\_

**Siblings Information:**

Name	Age	Grade	Present School

**Previous Preschool**

\_\_\_\_\_

**Name of Preschool** \_\_\_\_\_ **Address** \_\_\_\_\_

Please give your reasons for selecting Queen of Apostles Preschool \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you hear about our Preschool? \_\_\_\_\_

I accept the financial obligations to the Preschool and will pay tuition on time and in full. I will cooperate with the school in implementing their policies.

\_\_\_\_\_  
Father's Signature/Guardian's

\_\_\_\_\_  
Mother's Signature/Guardian's