

# BOW Registration Form 2011-2012

PreK3, PreK4, and Kdg.

Child's Name \_\_\_\_\_ Sex M F Date of Birth \_\_\_\_\_

School \_\_\_\_\_ PreK 3 PreK 4 Kdg.

Parent's Names \_\_\_\_\_

Email \_\_\_\_\_

Address w/ Zip \_\_\_\_\_

Cell Phone contact \_\_\_\_\_

Is your child Baptized?  Yes  No

Where? (Parish, City and State) \_\_\_\_\_

Allergies or Medical info? \_\_\_\_\_

Registration fee \$20

Office use: Paid \_\_\_\_\_ Check # \_\_\_\_\_

