



St. Mary's

CATHOLIC CHURCH
est. 1855

ST. MARY'S "GOOD SHEPHERD"

*2010 -2011 Registration
Sunday or Wednesday Sessions
Ages 3 - 6 years old*



Child's Name: _____
First Middle Last

Birthdate: _____

Age as of September 30, 2010 _____

Father's Name: _____

Mother's Name: _____

Address: _____

City: _____ **Zip Code:** _____

Home Phone: _____ **Cell Phone:** _____

Email Address: _____

Is your child potty trained? _____

Any information helpful in understanding your child OR any allergies to food:

{Choose time slot :} **Sunday** 9:15-10:35 a.m. _____ **OR** 11:15a.m.-12:35p.m. _____

OR Preschool Session's with Mrs. Marigene Maltese:

{Choose time slot :} **Wednesday** 9:30-11:00 a.m. _____ **OR** 1:00 - 2:30p.m. _____

Fee: \$50.00 per child with \$70.00 family maximum (please use one form per child)
Make checks payable to: St.Mary's Good Shepherd

To keep program affordable for all, please consider volunteering for Adult Parish Service Hours. Contact Deb Geason for more information at dgeason@stmarysandusky.org or 419.625.7465 ext.24

Mail check and registration form to: Mrs. Debbie Geason
St. Mary's Church
429 Central Ave.
Sandusky, OH 44870

Office use: Total Due \$ _____ Amt. Paid \$ _____ Date Paid _____
Cash _____ OR Check # _____