

PARENT'S DAY OUT APPLICATION FORM for 2 and 3 year old children

Please circle one: **Nativity School Family** **Nativity Parish Family** **Non-Nativity Parish Family**

PDO Options

Please select the sessions in which you wish to apply.

- | | |
|--|--------------------|
| <input type="checkbox"/> Tuesdays and Thursdays 9:00 am – 3:00 pm | \$240.00 per month |
| <input type="checkbox"/> Tuesdays or <input type="checkbox"/> Thursdays 9:00 am – 3:00 pm | \$120.00 per month |

Child's Full Name: _____ Preferred Name: _____

Birthdate: _____ Age on 8/31/2018: _____ Sex: _____ M _____ F
month day year

Address: _____ City & Zip: _____

Home phone: _____

E-mail: _____

Father's name: _____

Mother's name: _____

Place of employment: _____

Place of employment: _____

Occupation: _____

Occupation: _____

Business phone: _____

Business phone: _____

Cell phone: _____

Cell phone: _____

Statement of Child's Special Concerns/Needs: includes premature birth, allergies, existing illness, previous serious illness/injury, hospitalizations during the last 12 months and any medication prescribed for long-term, continuous use. (Indicate "None Known" or explain.)

(Use back of page if needed for additional *Special Concerns*)

An application fee of \$100.00 per student must accompany this form to be considered for placement. Make checks payable to Nativity Parish School. Application fee is non-refundable unless we cannot offer you placement. Please include a copy of your child's birth certificate.

For office use only

Application Fee _____

Check # _____