

Student's Information		
Last Name:	First Name:	MI:
<b>2019-2020</b> Grade :	Date of Birth:	
Gender:	Ethnicity:	
Faith/Religion:	Church where registered:	
<b><i>Early Childhood Class Choice (if applicable): circle choice</i></b>		
Pre-3, 2 half days/week: AM	Pre-3, 3 half days/week: AM or PM	
Pre-4, 5 half days/week: AM or PM	Kindergarten, 5 full/days week: _____	

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