



Nativity of the Blessed Virgin Mary School

Pre-K Application 2012-13

8550 Main Street • Williamsville, NY 14221
Phone: (716) 633-7441 Fax: (716) 626-1637



3 Year Old Program
(please check preference)

2 Mornings _____ **2 Afternoons** _____

4 Year Old Program (M,W,F)
(please check preference)

3 Mornings (8:30-11:30) _____ **3 Full Days (8:30-2:15)** _____

K-Readiness Program

5 Full Days _____

Student Name _____ Sex: M _____ F _____
(Last) (First) (Middle Initial)

Address _____ Zip Code _____

Home Phone Number _____ School District _____

Date of Birth _____ Place of Birth _____ No. of Siblings: Older _____ Younger _____

Religion _____ Present Parish _____

Baptism Date _____ Church _____ City _____

PARENT INFORMATION

Father Name _____ Religion _____ Marital Status _____
(Last) (First)

Employer _____

Work Phone _____ Cell Phone _____

Email Address _____

Mother Name _____ Religion _____ Marital Status _____
(Last) (First) (Maiden)

Employer _____

Work Phone _____ Cell Phone _____

Email Address _____

A NON-REFUNDABLE FEE OF \$100 IS REQUIRED WITH COMPLETED APPLICATION, ALONG WITH A BIRTH CERTIFICATE, BAPTISMAL CERTIFICATE AND IMMUNIZATION RECORD.

Tuition Payments (Please choose one)

Pay in Full by August 1 _____ Smart Program _____ (automatic monthly payment through your checking, savings, or credit card)

OFFICE USE ONLY

Date Received _____ Fee: Check _____ Cash _____
Birth Certificate _____ Baptismal Certificate _____ Immunization Record _____