## **OUR LADY OF SORROWS SCHOOL**



## In Faith and Love we build Christian Community

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Web-site: www.ourladyofsorrows.ca

## PRESCHOOL STUDENT PRE-REGISTRATION REQUEST FORM 2024-2025 SCHOOL YEAR

(Please print clearly)

CHILD'S SURNAME:	FATHER'S NAME:		MOTHER'S NAME:	
CHILD'S NAME:	BIRTHDATE (MM/DD/YYYY):		GRADE:	
	BIRTHDATE (MM/DD	/YYYY):	GRADE:	
	BIRTHDATE (MM/DD/YYYY):		GRADE:	
FULL ADDRESS:				
Email Address (Print clearly):				
HOME PHONE:	MOTHER'S CELL:		MOTHER'S WORK #:	
FATHER'S WORK #:	FATHER'S CELL:		CHILD BAPTIZED: ☐ Yes	
				□ No
RELIGION:	PARISH:			ENVELOPE #:
□ Catholic				
□ Other				
PROGRAM SCHEDULE – PLEASE SELECT YOUR 1 <sup>ST</sup> AND 2 <sup>ND</sup> CHOICE (BASED ON YOUR CHILD'S AGE)				
Tuesday / Thursday – <u>3 Year Old</u> AM Class: 8:30 a.m. – 11:15 a.m.				
PM Class: 12:15 p.m. – 3:00 p.m.				
Monday/Wednesday/Friday – 4 year Old AM Class: 8:30 a.m. – 11:15 a.m.				
PM Class: 12:15 p.m. – 3:00 p.m.				
TEACHER ASSISTANT REQUIRED: □ No □ Yes (If yes, please explain)				
PREVIOUS SCHOOL/PRESCHOOL:				
REASON FOR CHOOSING OUR LADY OF SORROWS SCHOOL:				
DATE:	SIGNATU			