

FOOT-Faith of Our Toddlers

**St Jane Frances de Chantal
Office of Religious Formation
Registration 2010-2011**

NAME _____

ADDRESS _____ **APT. #** _____

CITY _____ **STATE** _____ **ZIP CODE** _____

Date of Birth _____ **Age as of September 1st** _____

Place of Birth _____
City _____ **State** _____ **Zip** _____ **Country** _____

Baptism _____
Month/Day/Year _____ **Church** _____

City _____ **State** _____ **Zip** _____ **Country** _____

Nursery School /Day Care/ Learning Center Experience: Please Give Name and Location.

Briefly Describe.

Are there any needs/circumstances of which you would like us to be aware? (Allergies, handicaps...)

Father's Name _____ **Religion** _____
First _____ **Last** _____

Father's Cell _____

Mother's Name _____ **Religion** _____
First _____ **Last** _____

Mother's Cell or Work Phone _____

HOME PHONE _____ **Email** _____

(Please print clearly as this is how we communicate with you)

FOOT Tuition is \$75.00 per child. Tuition should be paid at time of registration. You may make check payable to St. Jane de Chantal Religious Formation. Thank You!