



St. Gregory Barbarigo School

315 South Davis Maryville, MO 64468
(660)582-2462 Fax (660)582-2496
www.stgregoryschool.org

Pre-Registration Form

Date: _____

Child's Name: _____
Last First Middle

Age (as of August 1st): _____ Sex: _____ Birthday: _____

Address: _____
Street City State Zip

Mother's email: _____ Father's Email: _____

Mother's Name: _____ Cell Phone: _____

Father's Name: _____ Cell Phone: _____

Other Preschool/Daycare Attended: _____

Church Attended: _____

Preschool Program - Please check your preference, listed are current fees, subject to change each year.

_____ Everyday, Monday through Friday \$3,750 a year

_____ Monday, Wednesday, and Friday \$2,850 a year

_____ Tuesday and Thursday* \$2,310 a year

only available for 1st year preschoolers who will not be entering kindergarten the following year.

Date and year you wish to enroll your child(ren) in Preschool: _____

Date and year you wish to enroll your child(ren) in Kindergarten: _____

A non-refundable \$50.00 administrative fee should be included with this completed form in order to reserve a space in our preschool program for those children enrolling for the first time.

Parent Signature

Date