



Registration Form

Please Return to the Tri-Parish Catholic Community of
St. Joseph, St. Leo, St. Martin,
415 S Hiawatha Ave, PO Box 36, Pipestone, MN 56164
507-825-3152 om@triparishmn.org

We are so glad you are considering "Noah's Ark" for your son or daughter's preschool education! We strive to provide an exceptional experience for all of our students while we minister to their spiritual, social, emotional, physical and intellectual needs. We are looking forward to your child joining us.

The following must be received in order to hold a position for enrollment of your child:

1. This Registration Form
2. A \$30 non-refundable registration fee. (Make checks payable to St. Leo Church)

In August you will receive a few more forms that will need to be filled out as well as a statement for the first months tuition. All forms and the first months tuition must be turned in before your child can attend preschool.

Child's Name: _____ Male _____ or Female _____

Date of Birth: _____

Program (circle): 3 year olds Tues/Thurs - 8:00 am - 11:00 am **or**

4/5 year olds Mon/Wed/Fri - 8:00 am - 11:00 am **or**

4/5 year olds Mon/Wed/Fri - 12:00 pm - 3:00 pm

Parent(s) Name: _____

Members of the Tri-Parish (circle): Yes or No

Home Address: _____

Home Phone: _____ Email: _____

Cell Phone _____

If you have any questions, please do not hesitate to call!