

**OUR LADY OF THE LAKE SCHOOL**  
26 Lakeside Avenue - Verona, NJ 07044  
973-239-1160  
Web Site [www.myoll.org](http://www.myoll.org)

**PRE-K 4 APPLICATION FORM 2010-2011**

**Child's Name**

Please Print Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Father's Name \_\_\_\_\_ First \_\_\_\_\_

Mother's Maiden \_\_\_\_\_ First \_\_\_\_\_

Address \_\_\_\_\_  
Street Town Zip

Phone number \_\_\_\_\_

**Child's Date of Birth** \_\_\_\_\_ **Sex** \_\_\_\_\_ **Race** \_\_\_\_\_

Religion \_\_\_\_\_ Our Lady of the Lake Parishioner yes or no  
**Circle one please**

PROGRAM DESIRED: (Please check one)

- \_\_\_\_\_ Pre 4 Monday, Wednesday & Friday 8:30 – 11:15 a.m.
- \_\_\_\_\_ Pre 4 Monday, Wednesday, & Friday with Lunch Bunch 8:30 – 12:30 p.m.
- \_\_\_\_\_ Pre 4 Monday, Wednesday, & Friday with Lunch Bunch & Enrichment 8:30 – 2:30 p.m.

- \_\_\_\_\_ Pre 4 Monday – Friday 8:30 – 11:15 a.m.
- \_\_\_\_\_ Pre 4 Monday – Friday with Lunch Bunch 8:30 – 12:30 p.m.
- \_\_\_\_\_ Pre 4 Monday – Friday with Lunch Bunch & Enrichment 8:30 – 2:30 p.m.

\_\_\_\_\_ Aftercare available until 6 p.m. (check for further information)

The programs operate from September to June. The initial registration fee of **\$150.00** per child is **non-refundable after March 1<sup>st</sup>** and must accompany this application along with a copy of the child's birth certificate. All health forms must be submitted by May 1.

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date