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Date: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_  
Last First M

**Date of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Birthplace:** \_\_\_\_\_

**Gender:** \_\_\_\_\_

**Child lives with:** Both Parents ( ) Mother ( ) Father ( ) Other ( ) \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Last First

**Phone Number:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
Last First

**Phone Number:** \_\_\_\_\_

**Present Church:** \_\_\_\_\_ Active ( ) Inactive ( )

**Check Year Child Enrolling for Kindergarten** (Child must be 5 on/before August 31<sup>st</sup> the year enrolling.)

2015 – 2016 \_\_\_\_\_

2016 – 2017 \_\_\_\_\_

2017 – 2018 \_\_\_\_\_

2018 – 2019 \_\_\_\_\_

2019 – 2020 \_\_\_\_\_

The pre-registration form is intended to help Lock Haven Catholic School plan for the future. Later each child will meet with an educator to determine readiness.

Date Received: \_\_\_\_\_