



## Kindergarten Registration 2026-2027 School Year

Child's Name \_\_\_\_\_

Parents' Names \_\_\_\_\_

Parents' Address \_\_\_\_\_

Parents' Email \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ Parents' Phone # \_\_\_\_\_

Are you Catholic? \_\_\_\_\_ If yes, parish \_\_\_\_\_

**Forms must be received prior to the first day of school.**

**Required Forms for Kindergarten: Birth Certificate, Baptism Certificate, Kindergarten Physical,  
Dental Exam, and Kindergarten Immunizations.**

**These can be dropped off to the office or emailed to [kari-price@cdolinc.net](mailto:kari-price@cdolinc.net) or [laurie-hergott@cdolinc.net](mailto:laurie-hergott@cdolinc.net).**

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date



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