

**PRE-REGISTRATION FORM
2019-2020
(FOR NEW PARENTS)**



FATHER'S NAME: _____

MOTHER'S NAME: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

MAILING ADDRESS: _____

CHILD #	STUDENT NAME	GRADE IN: 2019-2020	DATE OF BIRTH
1			
2			
3			
4			
5			
6			
7			

How did you hear about us? _____

Please return to Main Office for a registration appointment to be scheduled

ANDALUSIA SCHOOL DOES NOT DISCRIMINATE AGAINST ANY INDIVIDUAL ON THE BASIS OF RACE, COLOR, GENDER,
NATIONAL OR ETHNIC ORIGIN

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