

**Our Lady's Good Helpers Preschool Co-op
2020-2021 Registration**

Mother _____ Cell Phone _____

Father _____ Cell Phone _____

Home Address _____

Email Address _____

Home Parish _____

Have you completed VIRTUS training? YES NO If yes, what parish? _____

Children:

<i>Class (age by Sept 1st)</i>	<i>Name</i>	<i>Birthdate</i>	<i>Allergies/Medications/Food Limitations/Other Considerations</i>
<i>Bosco (age 4)</i>			
<i>Brise (age 3)</i>			
<i>Seton (age 2)</i>			
<i>Toddler Time (age 0-2)</i>			

Emergency Contact (spouse or other):

Name _____ Relationship _____

Phone Number(s) _____

Adults (other than parents) Authorized to pick up my child(ren) - name and phone number:

Return Registration by September 4th to:

olghpreschoolcoop@gmail.com or Mail to Lauren Wiesen at 5214 Flad Ave, Madison, WI 53711

Please mark your calendars for our Kick Off Meeting for registered members: Sept. 9th at 7:30pm @ St. Bernard

(administrative use only)

SAFE ENVIRONMENT TRAINING		
VIRTUS	BACKGROUND CHECK	RECEIPT AND AGREEMENT
Y/N	Y/N	Y/N