

KINDERGARTEN COMMITTEE TREASURER
Information and Profile Form

**Please include this form and a check for
\$75 with the PPC Weekday Kindergarten
application. All fees are nonrefundable.**

Kindergarten Age Group: _____ Number of Days Attending/Week: _____

Child's Full Name: _____ Birthday: _____

Name by Which (circle one) HE / SHE is called: _____

Home Address: _____

City/State: _____

Home Phone: _____ Cell Phone: _____

Father's Name: _____ Occupation: _____

Father's Business Address: _____

Father's Business Phone: _____

Mother's Name: _____ Occupation: _____

Mother's Business Address: _____

Mother's Business Phone: _____