

Bradt Primary School
2719 Hamburg Street
Schenectady, NY 12303

Preschool-Aged Child Census Form

Please fill out ONE form PER household address. Only list multiple children who live in the SAME household on this form.

Parent/Guardian:

Mr. Mrs. Ms. _____
Last Name First Name

Mr. Mrs. Ms. _____
Last Name First Name

Address: _____
Street Zip

Phone Number: _____

Child's Name: _____ Birthdate: _____
Last Name First Name mo/day/yr

Child's Address: same as above Gender: M/F (Circle)

Child's Name: _____ Birthdate: _____
Last Name First Name mo/day/yr

Child's Address: same as above Gender: M/F (Circle)

Child's Name: _____ Birthdate: _____
Last Name First Name mo/day/yr

Child's Address: same as above Gender: M/F (Circle)

Ethnic Group (Please circle one): 1. American Indian or Alaskan 2. Asian
3. African-American 4. Caucasian 5. Hispanic 6. Other _____

Please submit this form to Bradt School at the address above.

Thank you for helping us find
our next generation of students!