



**MY SCHOOL PRESCHOOL REGISTRATION FORM**

**STUDENT INFORMATION**

**Paid: (checks only, please!)**

CLASS:

**\$50 registration fee** \_\_\_\_\_

\_\_\_\_ 4 Day Pre-K    \_\_\_\_ 3-Day Pre-K AM    \_\_\_\_ 2-Day Preschool AM

**\$35 activity fee** \_\_\_\_\_

\_\_\_\_ 3 Day Pre-K PM    \_\_\_\_ 2-Day Preschool PM

**May Tuition** \_\_\_\_\_

**Total** \_\_\_\_\_ **Ck#** \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CELL: \_\_\_\_\_

\*\*EMAIL: \_\_\_\_\_

NAME TO BE USED IN SCHOOL: \_\_\_\_\_

NAME YOU WOULD LIKE CHILD TO WRITE: \_\_\_\_\_

(i.e. If your child's name is Nicholas - do you want him to use/write Nick or Nicholas?)

LIST ANY MEDICAL OR DIETARY/ ALLERGY INFORMATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LIST CHILD'S INTERESTS AND FAVORITE THINGS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT WOULD YOU LIKE TO SEE YOUR CHILD GAIN FROM PRESCHOOL?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FATHER INFORMATION**

NAME: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

**MOTHER INFORMATION**

NAME: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

SIBLINGS

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

THINGS WE SHOULD KNOW TO HELP US PLAN THE BEST YEAR FOR YOUR CHILD:

(i.e. separation anxiety; physical limitations; academic awareness; social or emotional concerns)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_