



APPLICATION FOR ENROLLMENT

Child's Name: _____ Male/Female: _____

Nickname: _____

Date of Birth: _____ Home Phone: _____

Cell phone number (s) _____

Email Address: _____

Home Address: _____

HOME AND FAMILY

Name of Parent or Guardian (1): _____

Relationship to child: _____

Employer / Occupation _____

Employer's Address: _____

Name of Parent or Guardian (2): _____

Relationship to child: _____

Employer/Occupation _____

Employer's Address: _____

List all children in the family including the preschool applicant, in order of birth (name, age:

List any other members of the household, or outside of the household who the child relates to on a regular basis: _____

Prior Years in Preschool: _____ (if applicable)

Name of the Preschool: _____

GENERAL INFORMATION

Who will bring your child to school? _____

Who will bring your child home from school? _____

EMERGENCY PHONE NUMBERS

Person to call **first** in case of emergency: _____

Phone #: _____

Alternative person to call in case of emergency: _____

Phone #: _____

Although we are not offering a half day program we are taking requests for a schedule of less than 5 days per week. We are currently able to have children come for three, four or five days per week. This is subject to change depending on enrollment and our ability to fill available slots.

Are you interested in five full days? _____ Yes _____ No

If not what is your request for scheduling? _____

**Rate Schedule – Based on Five Days Per Week
8.5 hours per day**

2011-12 Tuition	Per Hour	Per Day	Annual Rate
Full Time	\$5.06	\$43.00	\$7740
2012-2013 Tuition	Per Hour	Per Day	Annual Rate
Full Time	\$5.41	\$46.00	\$8280

Please check if you are applying for a reduced Fee slot: _____