

REGISTRATION FORM 2022-2023

Today's Date _____

New Student Returning Student

Please include a copy of your child's:

_____ **Medical Form**

_____ **Immunization Records**

_____ **Birth Certificate**

All forms are due by the first day of school.



Child:

Student's First, Middle, & Last Name _____

Age by Aug. 1, 2021 _____ Date of Birth _____ Male _____ Female _____

Address _____ City _____ St. _____ Zip _____

What are your child's interests? _____

Please describe your child's personality: _____

Has your child had any previous group experience outside of the home? If so, where? _____

Language(s) spoken at home: _____

Does your child have any speech, hearing, or other physical disabilities we should be aware?

No: _____ Yes: (please explain) _____

Please note any special food habits, allergies, problems, etc. _____

How did you hear about Presby Preschool? _____

Local Church Affiliation _____

I would like information about Presby Preschool's Scholarship Program. Yes _____ No _____

Parents/Guardians and other adults living in the household:

1. Name _____ Relationship to Student _____

Phone _____ Email _____

Occupation/Employer _____ Work Phone _____

2. Name _____ Relationship to Student _____

Phone _____ Email _____

Occupation /Employer _____ Work Phone _____

Student's Siblings (Names and ages) _____

Office Use Only

Fee:

Cash Check Money Order Online

Amount: _____ Check #: _____

Parents not living in household:

1. Name _____ Relationship to Student _____

2. Name _____ Relationship to Student _____

Please list legal custody arrangements & any other pertinent information. (You must supply us with a copy of any restraining, custody, visitation orders, or Adoption decree. We will keep these on file.)

Class Selection:

Registration Form(s) must be accompanied by a non-refundable registration fee.

New Student: \$75

Returning Families: \$65

Each additional child in the family: \$10

*Classes are filled on a first come first serve basis.

*If a class does not have sufficient enrollment, it will not be available and you will be notified

*Presby Preschool admits students of any race, religion, national or ethnic origin.

Please indicate your 1st, 2nd and 3rd choice.

MORNING CLASSES:

Apple Sprouts (3 by August 1, 2022)

_____ 2 day 9:00-11:30 Th-Fr (\$105/month)

_____ 3 day 9:00-11:30 M-W (\$140/month)

Apple Blossoms (4 by August 1, 2022)

_____ 3 day 9:00-11:30 M-W (\$140/month)

_____ 4 day 9:00-11:30 M-Th (\$175/month)

_____ 5 day **9:00-12:00** M-F (\$250/month)

AFTERNOON CLASSES:

Apple Sprouts (3 by August 1, 2022)

_____ 3 day 1:00 - 3:30 M-W (\$140/month)

Apple Blossoms (4 by August 1, 2022)

_____ 3 day 1:00-3:30 M-W (\$140/month)

_____ 4 day 1:00-3:30 M-Th (\$175/month)

I hereby consent to the enrollment of my child into the preschool program at Presby Preschool. I grant permission for my child to participate in all preschool activities, use all the play equipment, leave the school premises under supervision of staff for field trips, either walking or in authorized vehicles. I agree to me or my child being photographed or filmed (this may be used for promotional purposes, i.e. newspaper, website, Facebook, etc.). I agree to comply with the policies and procedures specified in the 2022-23 Presby Preschool Parent Handbook, as well as COVID specific policies as they become available. Furthermore, I agree to practice "COVID-19 Self Screening", until my child's time at Presby is over, and to notify Presby Preschool, immediately if my circumstances regarding COVID-19 change. In addition, I agree that Presby Preschool, its staff and volunteers will not be held liable for any damage, loss, injury, illness or death related to COVID-19 or any other circumstances.

I have read, understand and accept the terms of the above Presby Preschool 2022-23 Registration Form. ___ YES ___ NO

Parent Signature _____ Date _____