



## REGISTRATION FORM

Name of Student: \_\_\_\_\_ Nickname: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address: \_\_\_\_\_ Current Age: \_\_\_\_\_ Gender: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

### MOTHER'S INFORMATION

### FATHER'S INFORMATION

Name: \_\_\_\_\_

\_\_\_\_\_

Drivers License: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_

\_\_\_\_\_

Cell Phone: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

Does your child have any allergies? (If so, please explain): \_\_\_\_\_

Does your child have any medical conditions? (If so, please explain): \_\_\_\_\_

Should we feel it necessary based upon your description of your child's conditions or illnesses, would you be willing to provide a HIPPA authorization to allow access to your child's medical records in advance of enrollment?  Yes  No

How did you hear about our school? \_\_\_\_\_

### SCHEDULE

HALF DAY 8:30am - 12:30pm (Primary) and 8:30am - 12:00pm (Pre-Primary)

FULL DAY 8:30am - 3:00pm

EXTENDED DAY 7:00am - 6:30pm

Proposed Starting Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Days Attending: M T W TH F

### INFANT

(12 months – 20 months)

EXT. DAY: 2 DAYS \_\_\_\_\_

3 DAYS \_\_\_\_\_

5 DAYS \_\_\_\_\_

### PRE-PRIMARY

(18 months - 3 years old)

HALF DAY: 5 DAYS \_\_\_\_\_ 3 Days \_\_\_\_\_

FULL DAY: 5 DAYS \_\_\_\_\_ 3 Days \_\_\_\_\_

EXT. DAY: 5 DAYS \_\_\_\_\_ 3 Days \_\_\_\_\_

### PRIMARY

(3 - 6 years old)

HALF DAY: 5 DAYS \_\_\_\_\_ 4 DAYS \_\_\_\_\_ 3 Days \_\_\_\_\_

FULL DAY: 5 DAYS \_\_\_\_\_ 4 DAYS \_\_\_\_\_ 3 Days \_\_\_\_\_

EXT. DAY : 5 DAYS \_\_\_\_\_ 4 DAYS \_\_\_\_\_ 3 Days \_\_\_\_\_

Signature: \_\_\_\_\_ Printed Name \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

By signing this registration form I understand that registration fee is non-refundable and agree to all school policies, terms and conditions.

### FOR SCHOOL USE ONLY

Date of Enrollment: \_\_\_\_\_ Program: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Check #: \_\_\_\_\_

Registration Fee: \$ \_\_\_\_\_ Tuition Fee: \$ \_\_\_\_\_ Security Deposit: \$ \_\_\_\_\_ Supply Fee \$ \_\_\_\_\_