

### First Presbyterian Preschool Registration Form

Early Riser (drop-off at 7:30): M \_\_\_\_\_ T \_\_\_\_\_ W \_\_\_\_\_ Th \_\_\_\_\_ F \_\_\_\_\_

Children's Day Out AM Session: M \_\_\_\_\_ T \_\_\_\_\_ W \_\_\_\_\_ Th \_\_\_\_\_ F \_\_\_\_\_

PM 'til \*1:30: M \_\_\_\_\_ T \_\_\_\_\_ W \_\_\_\_\_ Th \_\_\_\_\_ F \_\_\_\_\_ PM 'til \*3:00: M \_\_\_\_\_ T \_\_\_\_\_ W \_\_\_\_\_ Th \_\_\_\_\_ F \_\_\_\_\_

Preschool: 5k \_\_\_\_\_ 4yr \_\_\_\_\_ (5dy) 4yr \_\_\_\_\_ (4dy) 4yr \_\_\_\_\_ (3dy) 3yr \_\_\_\_\_ (3dy) 3yr \_\_\_\_\_ (2dy)

Child's full name \_\_\_\_\_  
first middle last Name called

Boy or girl Birth date \_\_\_\_\_ Age \_\_\_\_\_ Church Affiliation \_\_\_\_\_

Child's address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Mailing address, if different \_\_\_\_\_

Email address \_\_\_\_\_

Mother's name \_\_\_\_\_ Work Place \_\_\_\_\_ Phone \_\_\_\_\_

Father's name \_\_\_\_\_ Work Place \_\_\_\_\_ Phone \_\_\_\_\_

Child lives with: \_\_\_\_\_ Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father

List all members of child's household:

Name	Relationship to child	Age of Children
_____	_____	_____
_____	_____	_____
_____	_____	_____

The school will make every possible effort to prevent accidents but in case of a mishap, neither the school, the teacher nor the First Presbyterian Church will be held liable.

Parent's signature \_\_\_\_\_