

SHEPHERD OF MY HEART PRESCHOOL

A Ministry of North Street Christian Church

724-282-7700

REGISTRATION FORM

2012-2013

EARLY
REGISTRATION
DISCOUNT!

Register by
May 18, 2012 to
receive **10%** off
September's tuition!

APPLICANT

Today's Date _____

Student's Name _____ Sex: M F Birth Date _____ Age _____

Address _____

Student lives with: Father & Mother _____ Mother _____ Father _____ Guardian _____

How did you learn about Shepherd of My Heart Preschool? Yard Sign Newspaper Advertisement Other _____

Who can we thank for referring you to our preschool? _____

FAMILY

Father's Name _____ Mother's Name _____

Address _____

Home Phone _____ Cell # _____ Business _____

Marital Status: Married _____ Widowed _____ Separated _____ Divorced _____ Remarried _____ Single _____

Church Family Attends _____ Regularly _____ Occasionally _____ Never _____

Guardian's Name _____ Address _____

Home Phone _____ Cell # _____ Business _____

E-mail Address: _____

Others in Home: (Please list name, age, and relationship.) _____

Previous Preschool or Group Experience: _____

Please include any other information that would be beneficial to the teacher. (For example: Special interests, fears, etc.)

PRESCHOOL INFORMATION

Pre-Kindergarten: For 4 & 5 Year Olds on *Monday, Wednesday and Friday* **Tuition:** \$95.00 per month
Preschooler must be 4 years old by September 1st.

Preschool: For 3 & 4 Year Olds on *Tuesday and Thursday* **Tuition:** \$70.00 per month
Children in this class must be potty trained and at least 3 years old by September 1st.

Check the appropriate class time you are registering for:

**(An afternoon Pre-Kindergarten class will be opened if enrollment in the morning sessions becomes full. Please check your time preference. We will do our best to honor your request if two classes are available.)*

_____ **Pre-Kindergarten:** Monday, Wednesday & Friday 9:00 AM – 11:30 AM

_____ ***Pre-Kindergarten:** Monday, Wednesday & Friday 12:30 PM - 3:00 PM*

_____ **Preschool:** Tuesday and Thursday 9:00 AM – 11:30 AM

Registration Fee: A \$25.00 non-refundable fee is due at enrollment. Please make check or money order payable to:
North Street Christian Church.

Please Note: Tuition is due the first week of each month.

STUDENT INFORMATION

Transportation: Person(s) responsible for child’s transportation to and from preschool.

1. _____ Phone _____ Relationship to student _____
2. _____ Phone _____ Relationship to student _____

EMERGENCY CONTACTS *In the event of an emergency, parents will be contacted **first** unless otherwise specified.*

1. _____ Phone _____ Relationship to Student _____
2. _____ Phone _____ Relationship to Student _____
3. _____ Phone _____ Relationship to Student _____

MEDICAL INFORMATION

Please list any special needs, disabilities, allergies, frequent illnesses or any other information you feel would be helpful to the teacher and staff at Shepherd of My Heart Christian Preschool.

PEDIATRICIAN'S NAME _____ PHONE _____

ADDRESS _____

IMMUNIZATION RECORDS: A copy of these records is to be submitted to the school on or before Preschool Orientation Day in August.

PARENTAL PERMISSION

MEDICAL:

I, _____, give "Shepherd of My Heart Christian Preschool" permission to seek emergency medical attention as needed for my child, _____.

Signature _____ Date _____

Print Name _____

PHOTOGRAPHS

I do _____ I do not _____ give permission for my child to be photographed for Preschool/Church use only.

FOR OFFICE USE ONLY

Registration Fee Received _____/_____/_____

Check # _____ Cash _____ Money Order # _____ Discounts _____

Immunization Records Received _____/_____/_____