

Barton Church Preschool Enrollment Form 2018/19

Applying For 3-year old Preschool* (Monday and Wednesday 9am to 12 noon) \$125 / mo
 3-year old Preschool* (Monday, Wednesday, Friday 9am to 12 noon) \$150 / mo
 4-year old Preschool* (Monday, Wednesday, Friday 9am to 12 noon) \$150 / mo

*To qualify for enrollment in each level, the child must be the age of the class and toilet trained by September 1st of the year of enrollment

CLASS PREFERENCE: **AM Class 9am-12:00pm** **PM Class 12:30pm-3:30pm**

Please include \$25.00 registration fee with application (non-refundable upon acceptance).

Tuition is due the first of each month beginning September 1st. An additional one-time materials fee of \$30 is payable with September's tuition.

STUDENT INFORMATION:

Student's Last Name _____ First Name _____ Middle _____ Gender: Male Female DOB ____/____/____

Street _____ City _____ Zip _____ Home Phone (____) _____

Student is living with: Parent(s) Guardian(s) Other _____

Baptism Date (if any): ____/____/____ Home Church: _____

HOME INFORMATION:

Mother's Name: _____ Occupation: _____ Place of Employment: _____

Work Phone: (____) _____ Cell Phone (____) _____ Email: _____ ODL# _____

Father's Name: _____ Occupation: _____ Place of Employment: _____

Work Phone: (____) _____ Cell Phone (____) _____ Email: _____ ODL# _____

Brothers and Sisters:

Name: _____ DOB _____

Name: _____ DOB _____

Name: _____ DOB _____

Although we do not publish any names or information we do occasionally use images of the children in promotional materials, including our website and brochures. Will you permit this in the case of your child?
(Circle One) YES NO

EMERGENCY INFORMATION

Name _____ Relationship _____ Phone (____) _____

Name _____ Relationship _____ Phone (____) _____

Pediatrician's Name _____ Phone (____) _____

In case of emergency, hospital preference: _____

List any health problems, allergies, etc. that we should be aware of:

List any physical or developmental considerations that we should be aware of:

LIST ALL ADULTS OTHER THAN PARENTS FOR POSSIBLE PICK UPS (otherwise no child will be released without a note from the parents)

Name _____ ODL # _____ Phone (____) _____

Name _____ ODL # _____ Phone (____) _____

ANYONE WHO IS NOT TO PICK UP YOUR CHILD

Name(s) _____

OTHER INFORMATION

Where did you hear about BCBC Preschool? _____

My Signature guarantees that this information is correct: X _____ Date: ____/____/____