Dragonfly Ranch Preschool
15898 S Springwater Rd
Oregon City, OR 97045
971-356-1715

DRAGONFLY RANCH PRESCHOOL

2025-2026

Registration Check-List

We welcome you and your child to the Dragonfly Ranch Preschool!
It will be a wonderful year filled with learning and growing experiences.
Please begin by registering your child – registration begins immediately.

The checklist below includes the items you will need to enroll your child for the 2025-2026 school year. Please make sure all your forms are included to complete the enrollment process.

Student's Name _____Date _____

1. Preschool Registration/Application Form (two pages; be sure to sign and date).

2. Tuition Agreement Form (complete the form for the specific program you are registering for – ex: 2-day/week program, 3-day/week program, 5-day/week program).

3. Authorizations and Agreements (be sure to sign and date).

4. Photocopy of Certified Birth Certificate (this can be from the state or the hospital).

5. Oregon Certificate of Immunization Record - Please sign and date this form.

6. Medical statement provided by the child's primary care physician.

7. Get to know your child form

If you have any questions please contact the directors Cara @971-359-6390, Dan @ 503-473-7822 or the preschool directly @ 971-356-1715..

To register: please have all completed paperwork and deposit to the preschool via mail or you may drop it off in person. If the paperwork isn't complete, we will have you complete it as soon as possible. A spot for your child will be held, and a spot is available if the deposit is provided.

Dragonfly Ranch Preschool
15898 S Springwater Rd
Oregon City, OR 97045
971-356-1715

DRAGONFLY RANCH PRESCHOOL

Registration/Application Form

Please Circle: 2 days: 3 days: 5 days
(5 days-AM ONLY)
AM (8:30-11:30) or PM (12-3)

Student Name: _____ DOB: _____
Address:_____Gender: M or F
Mother name and address:
_____
Telephone Number:
_____
Email:_____
Place of employment/Number: _____
Father's name and address:
_____
Telephone number: _____
Email:_____
Place of employment/Number: _____
Marital status: _____
Emergency Contacts:
Name: _____
Number: _____
Name: _____
Number: _____

Other people authorized to pick up your child:
Name: _____Relationship: _____
Address: _____
#: _____
Name: _____Relationship: _____
Address: _____
#: _____

Allergies or other medical conditions:
_____
_____
_____
_____

Dragonfly Ranch Preschool
15898 S Springwater Rd
Oregon City, OR 97045
971-356-1715

Medications Taken/Dosage (if any):

_____

_____

Do you permit us to administer medications if needed? Yes or No

Does your child have a verified disability? If so, please explain:

_____

_____

_____

Is your child fully potty-trained? Yes No

What does he/she say when they need to use the bathroom?

_____

Does your child need support dressing? Yes No Sometimes
Does your child need support to feed themselves? Yes No Sometimes
Does your child need support washing their hands or face? Yes No Sometimes

Does your child have any fears or is there anything else we should know? _____

_____

_____

Has your child been cared for by anyone other than parents/guardians? _____

_____

_____

Siblings: please list the names, ages, grades, and school of any siblings:

Name:	Age:	Grade:	School:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Previous preschools, daycares, etc…(name, location and dates):

_____

_____

Dragonfly Ranch Preschool
15898 S Springwater Rd
Oregon City, OR 97045
971-356-1715

Which holidays do you celebrate?

_____

_____

What is your child's comfort level around animals? Please explain:

_____

_____

Does the child currently have any pets? _____ What kind? Names?

_____

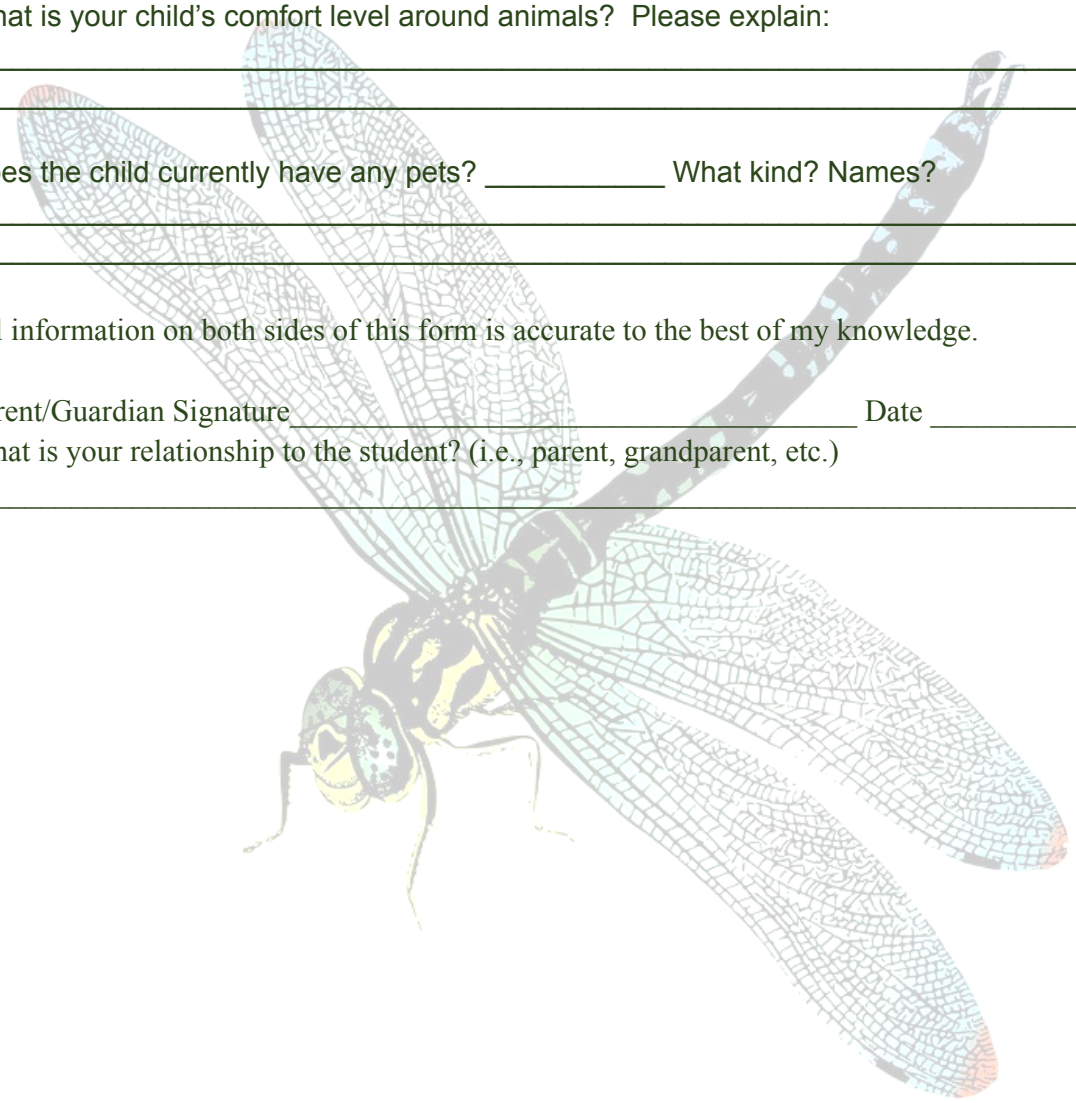
_____

All information on both sides of this form is accurate to the best of my knowledge.

Parent/Guardian Signature_____ Date _____

What is your relationship to the student? (i.e., parent, grandparent, etc.)

_____



Dragonfly Ranch Preschool
15898 S Springwater Rd
Oregon City, OR 97045
971-356-1715

DRAGONFLY RANCH PRESCHOOL

2024-2025

TUITION AGREEMENT

2 DAYS/WEEK: $450 per month
3 DAYS/WEEK: $550 per month
5 DAYS/WEEK: $650 per month

(For Fall registration your child needs to be 3, 4, or 5 years old on or before 9/1/25:
Our calendar is based on the Oregon City School District)

Please complete this form and mail to the preschool with your $100.00 non-refundable deposit. Dragonfly Ranch Preschool can accept checks, cash, venmo, credit cards. Please make checks payable to: **Dragonfly Ranch Preschool**. If you would like to pay by credit card, just let us know and we will send an invoice via email through square. The deposit will be applied towards preschool supplies if your child is placed in our center.

AGREEMENT FOR PAYMENT OF TUITION

Payment for the 2025-2026 center year will total _____ (if your child is coming 2 days it will be $450 x 10 months or 5 days $650 x 10 months). We will offer a 10% discount for siblings. We no longer offer a discount for full-year payments. Payments are due on the first business day of the month. Please let us know at the beginning of each month how you will be paying.
You may mail or hand-deliver your check. Following the initial payment, an invoice will be sent to you on the 25th of each month. If payment is not received, a 2nd notice will be sent on the 10th of the month. If we do not receive payment by the end of a given month then we will contact you to consider alternatives.

Student's Name:_____

I acknowledge that my deposit is non-refundable unless Dragonfly Ranch Preschool cannot provide placement. I understand the deposit will be applied to learning center supplies. I agree to the payment requirements as stated above.

*Please be aware that we will hold your deposit until a placement has been made.

_____ _____

Parent/Guardian Signature Date

Dragonfly Ranch Preschool
15898 S Springwater Rd
Oregon City, OR 97045
971-356-1715

DRAGONFLY RANCH PRESCHOOL

2025-2026

Authorizations & Agreements

My child may be given non-prescribed medication as indicated on the container, including sunscreen, children's pain reliever, and anti-bacterial first aid cream. Syrup of ipecac may be administered if deemed necessary by a poison control operator. We will contact parents prior to administering non-prescription pain relievers. Prescription medications must be current and require permission slips for each medication.

Being a functioning farm, we do have live animals, equipment, and tools. Although we take precautions and much care, accidents could occur. I am aware of this and assume the risk.

In an emergency, Cara Shambaugh/ Dan Silvey/ Dragonfly Ranch has my permission to call an ambulance, 911, or to take my child to any available physician or hospital at my expense and to obtain medical treatment for my child.

With prior notification and approval, my child may be taken on field trips by private motor vehicle; and on neighborhood walking excursions, while under direct supervision.

My child may be photographed for sharing photos, publicity, news: (please check below)

_____ YES _____ NO

Please be sure to contact the directors, Cara Shambaugh @ 971-359-6390, Dan Silvey @ 503-473-7822, or Dragonfly Ranch Preschool @ 971-356-1715 with any questions or adjustments. Your signature below states that you understand and agree to all of the above and that you release Dragonfly Ranch, Dragonfly Ranch Preschool, Cara Shambaugh, Dan Silvey and Staff, from any liability.

Thank you so much!

_____ _____

Parent/Guardian Signature Date

Dragonfly Ranch Preschool
15898 S Springwater Rd
Oregon City, OR 97045
971-356-1715

Getting to Know Your Child

Dear Parents,

Please fill out the following questionnaire and return it to the school as soon as possible.

Child's preferred name_____
I'd describe my son/daughter as: _____
_____
One important thing to know about my son/daughter is:
_____
_____
What does your child like best about school?
_____
_____
His/her strengths include: _____
_____
_____
Areas of concern: _____
_____
_____
List some activities your child is interested or involved in:
_____
_____
What hopes or goals do you have for your child in preschool?
_____
_____
Any additional comments or information you would like to share.
_____
_____