

OFFICE USE ONLY

Date Received

Registration Fee

Confirmation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SONSHINE PRESCHOOL**

2019-20 APPLICATION FOR ADMISSION

PLEASE PRINT NEATLY AND CLEARLY

**Child's Name** Nick Name Male\_\_\_ Female\_\_\_Birthdate

Address City State Ohio Zip

**Primary Contact Name** Phone ( \_\_\_\_\_\_ )

Relationship to Child

**Secondary Contact Name** Phone ( \_\_\_\_\_\_ )

Relationship to Child

**Parent/Guardian Name** Relationship to Child

Home Address Home Phone ( \_\_\_\_\_\_ )

City State Zip Cell Phone ( \_\_\_\_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Work Phone ( \_\_\_\_\_\_ )

Occupation Hours

**Parent/Guardian Name** Relationship to Child

Home Address Home Phone ( \_\_\_\_\_\_ )

City State Zip Cell Phone ( \_\_\_\_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Work Phone ( \_\_\_\_\_\_ )

Occupation Hours

**Other persons who will be responsible for picking up your child (NOT PARENTS):**

Name & Relationship to Child Phone ( )

Name & Relationship to Child Phone ( )

Name & Relationship to Child Phone ( )

Please mark your preference below with a **1st** and **2nd** choice.

All classes meet 9:15AM-12:00PM Children must be at least 3 years old and toilet trained.

**(MWF & T/TH Children ages 3-5) MWF** (3 day)\_\_\_\_\_\_\_\_\_\_\_ **T/TH** (2 day) \_\_\_\_\_\_\_\_\_\_

**Pre K: MTWTF** (5 day)\_\_\_\_\_\_\_\_\_\_(child **MUST** be 4 by August 1 and entering Kindergarten the following year)

**\*Class Placement is on a 1st come 1st served basis.**

**\*No application will be placed until $50 registration fee is paid.**