Georgetown Baptist Preschool Enrollment Form

Date of Application Type here	Enrollment Da	Enrollment Date Mo./Yr. August 2024		
Desired Class (Circle): 3 yr. old: T/TH P	re-K: MWF (3 days)	Pre-K: M-TH (4 days)		
Date of Birthtype here /	Nicknametype 	e here Mor F		
Primary Phone Number :()	cir	cle: Home Work Cell		
Name of individual enrolling the child:type Are you the legal parent or guardian?t (If no, have you informed the parent or legal guardian) Parent/GuardianName:type here Work Number: (type here	ypeshereno an you are enrolling this	•		
Parent/Guardian Name:type here Work Number: (type here) Email:type here				
Emergency person to be contacted if parel Name: type here Name: type here Important information you'd like us to know type here				
Please list all allergies , especially those asso type here	ciated with food or	medical information:		
By signing below, I give permission for Emero in my/our absence. Parent Signature: type here Physician's Name type here	gency Medical Care Preferred I Number: (Hospital: type here		
Are you a church member? ()Yes ()	No If yes, where? <u>t</u>	ype here		

Please mail or return completed application and \$100 non-refundable registration fee to:

Georgetown Baptist Preschool 209 South Hamilton Street Georgetown, KY 40324 (502) 863-4608

Georgetown Baptist Preschool Approved Dismissal Form

IMPORTANT: A student will NOT be dismissed from preschool without permission from the parent or guardian. Please LIST below all persons designated to pick up your child from preschool INCLUDING THE PARENTS AND/OR GUARDIANS. The safety and protection of our students is a top priority. Unfamiliar individuals will be asked to show identification to assure they are on this approved list. Please return this form as soon as possible. If you need to make changes to this list after the start of the year, please contact school staff.

Name:	Relationship:	Phone:	Alternate Phone:
type here	type here	type here	type here
type here	type here	type here	type here
type here	type here	type here	type here
type here	type here	type here	type here
type here	type here	type here	type here
type here	type here	type here	type here

Playground Permission

Student Name:

type here

My child, _	type here	, has permission to
his/her clas	P playground across the street (206 S. F is for the 2024-25 school year. My child alks for the 2024-25 school year.	•
Parent Signature:	type here	

Georgetown Baptist Preschool Photo Release Form

From time to time, Georgetown Baptist Preschool will take photographs that may be used in newsletters, press releases, on our website, and in other promotions or community news etc... We do **not** use the student's name. Please mark the appropriate choice below to indicate your decision for our use of photographs of your child.

Yes, Georgetown Baptist Preschool has permission to take and use photographs of my child. (Child's name will not be used).
No, I do not give permission for Georgetown Baptist Preschool to use photographs of my child.
type here
Student Name
type here
Parent Signature
2024-25
School Year

Pet Permission Form

The state requires written consent from parents/caregivers in order to have "pets" in the classroom. Although we do not regularly keep pets in our buildings (with the possible exception of fish), we do occasionally use animals, reptiles, and amphibians to enhance the educational experience. For example; we partner with Scott Co. 4-H to study Life Cycles. In the past they allow us to borrow an incubator to hatch baby chicks. By signing below, you give GBP permission to house such animals in our facility and/or use them for educational purposes.

type here 2024-25

Parent Signature

School Year