## Little Angels MDO Preschool

ADDRESS: 1515 W. ADAMS AVE 76504

PHONE: 254-217-5035



Little Angels
Mothers Day Out
Preschool

<u>Times:</u>	Early Bird	9AM-12:30PM	9AM-2:00PM
CHILD INFORMATION			
CHILD'S NAME:		DOB:	
MEDICAL	CONDITIONS/ALL	EGIES:	
PEDIATRIC	CIAN:		
CONTACT INFORMATION			
HOME ADDRESS:			
PHONE: _			
EMAIL: _			
PRIMARY GUARDIAN INFORMATION			
NAME:		RELATIONSHIP TO (	CHILD:
DAYTIME CONTACT PHONE NUMBER:			
NAME:	ME:RELATIONSHIP TO CHILD:		
DAYTIME CONTACT PHONE NUMBER:			
WHICH GU	ARDIAN SHOULD	BE CONTACTED FIRST: .	

## **EMERGENCY CONTACT** NAME: \_\_\_\_\_\_RELATIONSHIP TO CHILD\_\_\_\_\_ DAYTIME PHONE: OTHER PHONE NUMBER: \_\_\_\_\_ **AUTHORIZED PICKUPS** NAME: \_\_\_\_\_RELATIONSHIP TO CHILD\_\_\_\_\_ NAME: \_\_\_\_\_RELATIONSHIP TO CHILD\_\_\_\_\_ NAME: \_\_\_\_\_RELATIONSHIP TO CHILD\_\_\_\_\_ PLEASE CHECK HERE IF NO ONE OTHER THAN PARENTS ARE ALLOWED TO PICK UP CHILD.\_\_\_\_ ADDITIONAL COMMENTS AND INFORMATION OFFICE USE ONLY: ENROLLMENT DATES: REGISTRATION FEE PAID SHOT RECORD RECEIVED:

PARENT/PROVIDER CONTRACT SIGNED: \_\_\_\_\_

PARENT DOOR CODE (IF NEEDED):