

Student Registration Form School Year ____-

Thank you for your interest in our preschool! We look forward to welcoming your child into our classroom for the upcoming school year. Please provide us with the information requested on both sides of this page.

BASIC INFORMATION:								
Ch	nild's Name:	_ Gender □ M / □ F	Birth Date:					
Pr	imary/Parent Contact Name:	Email:						
Ac	ddress:							
Ph	none (primary):	(secondary):						
Se	econdary Parent Contact Name:	Email:						
Ac	ddress:							
Ph	none (primary):	(secondary):						
Sil	blings' names/ages:							
ABOUT YOUR CHILD:								
Lil	kes:							
Di	slikes:							
St	rengths/Attributes:							
Fe	Fears/challenges/anxieties:							
W	When your child needs redirection or discipline, is there any method that they respond to?:							
	· · · · · · · · · · · · · · · · · · ·							

	•	,	vould like to sha	-	
IERS' NOTES:					
ILIO NOTES.					

REGISTRATION AND ENROLLMENT POLICIIES:

Registering your child for enrollment at Pennypack Preschool constitutes acceptance of the following policies and permissions.

Children attending Pennypack Preschool must be at least 3 years of age by the end of month of enrollment.

Children attending Pennypack Preschool must be **nearly or fully potty-trained** before their first class or shortly thereafter.

Children attending Pennypack Preschool are **expected to meet acceptable standards of conduct**, and treat their peers and teachers with courtesy and respect.

Pennypack Preschool reserves **the right to withdraw any child from enrollment** if they are not able to exhibit acceptable conduct, or if the needs and/or welfare of the child or the class can not be met. These determinations will be based exclusively on the assessment of the teachers and administrators.

In completing the registration form for your child, you attest that **you understand that participating in preschool activities involves a certain degree of inherent risk**, although we will do everything we can to ensure the safety of your children.

In completing the registration form for your child, you release Pennypack Preschool, The Lord's New Church, and all associated teachers and volunteers from any and all **claims and liabilities** arising out of the preschool's activities.

In completing the registration form for your child, you grant permission for teachers of Pennypack Preschool to call an ambulance and/or obtain **emergency medical treatment** for your child.

Registration



PROGRAM SELECTION:

Classes are held from 9:00 a.m. to 12:00 noon. The school year runs from September to May.

	To be filled by TEACHER or ADMINISTRATOR before signing:	COST/Month*	Fee					
	□ 5-day □ 4-day □ 3-day □ 2-day	\$	\$75.00					
	Mornings: ☐ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri	\$	\$75.00					
	*Based on current price sheet							
□ "I hav	ve no prior expectation or preference for placement in a	a particular teacher's cla	assroom."					
	we a (\square mild / \square strong) expectation or preference for nild's past history, familiarity, etc."	placement in (□ Mrs. B	rock's / 🗆 Mrs. R	ose's) class due				
according	ck will make every effort to place children accordingly, but res g to availability and other factors, and may ask parents to cor listribution.							
Pre-regist	tration (indicates intent only – no payment requ	uired)						
You are encouraged to pre-register before the registration period. This will provide a record of your intent, which may be necessary to help prioritize acceptance if we have too many applicants to accommodate. It also helps us keep track in order to contact you when registration opens, etc. This does not constitute a final commitment, and does not guarantee a spot for your child in one of our classes. NOTE: You will still need to complete your registration once the full registration period begins.								
Name (pr	rint): Signature:	Date	::					
Full Regis	tration (may be completed during registration	period only)						
Re	equirements (to be completed by teacher or administration	tor) Rece	ived (init)					
	This form (please fill out both sides, sign and dat	•						
	PA Emergency Contact / Parental Consent Form (
	PA Child Health Report (CD 51)							
	Registration fee: \$75.00 (non-refundable)							
□ "I ha\	ve read, understand, and accept Pennypack Preschool's	registration and enroll	ment policies (on	page 2)."				
Name (pr	rint): Signature:	Date	::					

Make checks payable to "Pennypack Preschool," mail to:

Pennypack Preschool, LLC, c/o The Lord's New Church, P.O. Box 331, Bryn Athyn, PA 19009

Phone: 215-947-2106