

 **Pre-Enrollment Form**

Child's Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Today's Date:\_\_\_\_\_\_\_\_\_\_\_\_

Child's Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Potty-trained: Yes\_\_\_ No\_\_\_ In progress\_\_\_

\*If marked no or in progress, please explain where you are at in the process:

Parents’ Names:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Enrollment Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s age at this time: \_\_\_\_\_\_\_

**\*Please note that enrollment typically starts in fall, minimum age at time of enrollment is 3 and kids must be potty trained at this time**

Preferred Schedule: (Currently we are offering 4 or 5 full day schedules; typically the schedule will be Mon-Thur or Mon-Fri, but we may be able to make some exceptions)

| Monday | Tuesday | Wednesday | Thursday | Friday |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

\*Please note if you have flexibility with your schedule:

How did you hear about our school?