

FROM ROOTS TO WINGS PRESCHOOL ENROLLMENT INFORMATION

Child's Name \_\_\_\_\_ Known By \_\_\_\_\_  
Address \_\_\_\_\_  
Birth date \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_  
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PARENT INFORMATION

Father's Name \_\_\_\_\_ Marital status \_\_\_\_\_  
Home address \_\_\_\_\_ Phone \_\_\_\_\_  
Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Marital status \_\_\_\_\_  
Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Mother's Work Hours/ Days \_\_\_\_\_ Fathers Work Hours/Days \_\_\_\_\_  
Ages of Brothers \_\_\_\_\_ Ages of Sisters \_\_\_\_\_ Any pets \_\_\_\_\_  
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List at least two persons to whom your child may be released for regular after school. Other names can be added on the back or at a later time.

Names may be different from emergency pick up.

Name                      Address                                      Phone and cell phone

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Does your child dress self? \_\_\_\_\_ Is your child Left handed? \_\_\_\_\_  
Previous group or school experiences? \_\_\_\_\_  
Any activities your child is enrolled in \_\_\_\_\_  
Does your child need help with toileting? Are there special words or actions your child uses to indicate toileting needs? \_\_\_\_\_  
What reading / math does your child know? \_\_\_\_\_  
Favorite play activities/toys \_\_\_\_\_  
Do you plan to send your child to Kindergarten next year \_\_\_\_\_  
Any special talents or abilities? \_\_\_\_\_  
Any particular food restrictions? \_\_\_\_\_  
Any other information you want me to know? \_\_\_\_\_

Any specific concerns you may have? \_\_\_\_\_

The school retains the right to dismiss from the group any child who, after a reasonable trial, demonstrates an inability to participate in or benefit

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Date \_\_\_\_\_

from the school, or whose presence is detrimental to the group.

Below and on the back, please list specifically what you want your child to gain or experience from this preschool year. I will try my very best to help him or her meet those goals. If these goals change during the year, please let me know. I appreciate and value your input and am open to any discussion of any concerns or questions you may have about your child's learning experience here at From Roots to Wings.

A \$50.00 Non Refundable Registration fee is required and must be included with Registration form to hold your child's spot in the Fall 2018-2019 school year beginning September 5, 2018

Parent  
Signature \_\_\_\_\_ Date \_\_\_\_\_

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Date \_\_\_\_\_