

FOR OFFICE USE ONLY

| Child enrolled in |
|-----------------------|
| Registration fee paid |
| Date Received |

HUGGING TREE NATURE PRESCHOOL REGISTRATION FORM

1617 Rainbow Drive | Waterloo, IA 50701 | 319-423-9798

This form must be accompanied by a \$50 non-refundable fee in order for this registration to be complete.

The first month's tuition is due by August 1^{st} to ensure a placement.

| CHILD'S INFORMATION | | DATE: | | | |
|--|-------------|------------------|-----------------------|------|--|
| Child's Full Name: | | | | Sex: | |
| Nickname or preferred name to be used in c | lass: | | | | |
| Child's Birth Date: | Age: | Year child v | will enter kindergart | en: | |
| Address: | Cit | :y: | State : | Zip: | |
| Home Phone: | Child lives | orimarily with : | | | |
| Daycare Provider: | | Dayca | re hours: | | |
| Daycare Provider Home Phone: | | Daycare Pro | vider Cell Phone: | | |
| Referred to Preschool by: | | Relation | onship: | | |

CLASS ENRULLIVIENT

Check the appropriate box for the class in which you are enrolling your child.

PRESCHOOL CLASSES

*Child must be 3 years old by September 15, 2025

Half Days

| 2 Days | Tuesday/Thursday 9:00 am – 12:00 pm | \$50/week |
|--------|---|-----------|
| 3 Days | Monday/Wednesday/Friday 9:00 am – 12:00 pm | \$65/week |
| 5 Days | Monday-Friday 9:00 am – 12:00 pm | \$90/week |

Full Days

| - | | |
|--------|--|------------|
| 2 Days | Tuesday/Thursday 9:00 am – 3:30 pm | \$66/week |
| 3 Days | Monday/Wednesday/Friday 9:00 am – 3:30 pm | \$99/week |
| 5 Days | Monday-Friday 9:00 am – 3:30 pm | \$165/week |

MOTHER'S INFORMATION

| Mother's Full Name: | | Home Phone: | | |
|---|------------------|-------------|--------|--|
| Address: | City: | State: | Zip: | |
| Cell Phone: | _Email: | | | |
| Occupation: | Worl | k Hours: | | |
| Name of Employer: | \ | Work Phone: | | |
| Business Address: | City: | State: | Zip: | |
| Best Way to Contact: | | | | |
| FATHER'S INFORMATION | | | | |
| Father's Full Name: | | Home Phone: | | |
| Address: | City: | State: | Zip: | |
| Cell Phone: | _Email: | | | |
| Occupation: | Worl | k Hours: | | |
| Name of Employer: | \ | Work Phone: | | |
| Business Address: | City: | State: | Zip: | |
| Best Way to Contact: | | | | |
| PARENTAL STATUS:MarriedLiving Together | DivorcedSeparate | edWidowed | Single | |
| LIVING ARRANGEMENTS: List all people living with the child. | | | | |

| FULL NAME | AGE | RELATIONSHIP TO CHILD |
|-----------|-----|-----------------------|
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| ALLERGY INFOR | MATION: | | | | |
|------------------------|-----------------------|---------------------------|--------------------|----------------------|--------|
| Does your child have | any known allergie | es? If so, please explair | 1. | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| HEALTH CONCER | RNS: | | | | |
| Does your child have | any known health | concerns (asthma, dia | betes, eczema, etc | .)? If so, please ex | plain. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| PLAY AND SOCIA | AL DEVELOPME | NT: | | | |
| | | | | | |
| How does your child | get along with othe | er children? | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Who does your child | usually play with? | | | | |
| Check all that apply | | | | | |
| | | | | | |
| Same Age | Younger | Older | Boys | Girls | Adults |
| | | | | | |
| What is the usual size | e of your child's pla | ygroup? | | | |
| | | | | | |
| What is your child's p | previous group expe | erience? | | | |
| Check all that apply | | | | | |
| | | | | | |
| Day Care | Preschool | Sunday School | Playgrou | p Other | |
| | | | | | |
| | | | | | |
| | | | | | |
| PERSONALITY A | ND EMOTIONA | L DEVELOPMENT | | | |
| How would you dose | rihe vour child's no | rsonality? | | | |
| riow would you desc | nbe your ciliu's pe | 13011a11Ly: | | | |
| | | | | | |

| What situations tend to upset your child and how does he/she react? |
|--|
| |
| Describe your child's reactions to new places and people. |
| What are your child's fears? |
| Does your child have any nervous habits? If so, please explain |
| What are some your child's interests and favorite activities? |
| |
| Please list anything else you want us to know about your child |
| |
| DISCIPLINE When you find it necessary to discipline your child, what methods do you use? |
| OTHER INFORMATION What do you expect your child to gain from our preschool? |
| How did you hear about Hugging Tree Nature Preschool? Check all that apply |
| sign word of mouthwebsitesocial media other |