

PERSONAL HISTORY

- 1) Does child live with both parents? _____, Mother _____, Father _____
Other? _____
- 2) The primary language spoken at home is _____
- 3) Has your child had a previous group or preschool experience? _____ Where _____
- 4) What words does your child use for toileting? _____
(The *Handbook states that all 3 year olds MUST be toilet trained.) (*Children should be able to tell the teachers, go to the restroom and care for their restroom needs by themselves.)
- 5) Does your child have any of the following: (If yes, please explain)
Allergies? _____
Previous serious illness or injuries? _____
Hospitalization during the last 12 months? _____
Any medication prescribed for long-term use? _____
- 6) Are there any other problems regarding your child's health and/or behavior which you feel we should be aware of? _____

REGISTRATION FEE/SUPPLY FEE – NON-REFUNDABLE

*Discount on registration fee/supply fee of 25% for more than one child. The lowest fee will be discounted.

NUMBER OF DAYS	DAYS OFFERED	REGISTRATION FEE	TUITION (September-May)	PLEASE CHECK
ONE DAY 3 month olds to 12 month olds	Tuesday Wednesday Thursday Friday	\$135.00	\$135.00	Tuesday____ Wednesday____ Thursday____ Friday_____
ONE DAY 13 Month olds – Transitional 3 year olds	Friday	\$135.00	\$135.00	Friday_____
TWO DAYS All ages	T/TR W/F	\$145.00	\$210.00	T/TR_____ W/F_____
THREE DAYS All ages	T/W/TR	\$165.00	\$280.00	T/W/TR____
FOUR DAYS All ages	T-F	\$210.00	\$365.00	T-F_____
TRANSITIONAL KINDERGARTEN Turning 5 in Spring 2010-Fall 2010	T-F	\$225.00	\$395.00	T-F_____

By signing this document I agree & understand that at no time or for any reason is the Registration/Supply fee refundable.

Parent's Signature _____ Date _____
Staff's Signature _____ Date _____