

# First Presbyterian Preschool Registration Form (2024-2025)

Registering for: \_\_\_\_\_ 3-Year-Old Class \_\_\_\_\_ 4/5-Year-Old Class  
Sunshine Room Star Room  
Tues/Thurs 9:00 - 12:00 Tues/Wed/Thurs 9:00 - 12:00

Please **PRINT** all answers legibly. This information is critical for communication.

Child's Full Name \_\_\_\_\_ Nickname \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Child's Date of Birth \_\_\_\_\_

Home/Mailing Address \_\_\_\_\_  
# and Street Town Zip Code

Primary E-mail Address \_\_\_\_\_

Home Phone (with area code) \_\_\_\_\_

Mother's Cell Phone (with area code) \_\_\_\_\_

Father's Cell Phone (with area code) \_\_\_\_\_

Mother's Name \_\_\_\_\_ Place of Employment \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Father's Name \_\_\_\_\_ Place of Employment \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Do both parents live with this child? \_\_\_\_\_

If not, which parent is the primary contact person for preschool? \_\_\_\_\_

Please provide **two** names and phone numbers for **Emergencies**: (Other than the parents.)

Name \_\_\_\_\_ Phone (w/code) \_\_\_\_\_ Relation \_\_\_\_\_

Name \_\_\_\_\_ Phone (w/code) \_\_\_\_\_ Relation \_\_\_\_\_

List other members of the household:

Name

Relationship to Child

Sibling Ages/DOB

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Has your child/siblings previously attended our preschool? \_\_\_\_\_

Has your child attended any other preschool? \_\_\_\_\_ Where? \_\_\_\_\_

How did you learn of our preschool? \_\_\_\_\_

What do you hope your child will gain by attending our preschool?

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What other information would you like to share that you feel would help us better understand and help your child be comfortable and successful at our preschool?

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**Medical Information:**

Child's Primary Care Doctor \_\_\_\_\_ Phone Number \_\_\_\_\_

Does your child have any allergies of which we need to be aware?

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List any Serious Illnesses/Conditions/Injuries/Surgeries, or Services (Speech/Lang, OT/PT, etc.)

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Your name, address and phone number will be posted on the class roster for families **unless** you indicate here not to print. \_\_\_\_\_ Please do **NOT** print my information on the class roster.

\_\_\_\_\_ I would be interested in serving on the preschool board. (Please check if interested.)