

Email Confirmation Date

Registration Fee:

\$ 125 - new student \$ 100 - returning student (non-refundable)

Office Use:	
Date Paid	Amount \$
Check #	or Cash

Parent Orientation Confirmation

Enrolling For:	3 YEAR OLD CLASS: 4 YEAR OLD CLASS: 5 YEAR OLD CLASS:	3 DAY (T 5 DAY (N	Л-F)	_ 5 DAY (M-F)	
Child's Name					Office Use:
Child's Name:	(First)	(Middle)		(Last)	_
	me your child will learn to			Male / Fe	male
* Only include legal po	•				
Mother/Guardian:			Father/Gua	 ırdian:	
Place of Employmer	nt:		Place of Em	ıployment:	
Employment City/St	ate		Employmer	nt City/State	
Home Address:			Home Addr	·ess:	
Primary Phone:		cell / work	Primary Ph	one:	cell / work
Secondary Phone:		cell / work	Secondary	Phone:	cell / work
Email:			Email:		
(circle one) Child li	ves with: mother/fat	her mother	father	mother & father sepa	arately
(circle one) YES /	If yes, docume <i>If custody i</i>	entation is required.	rents/guardiar	of the child's parents o	
Child's Physician:				Phone:	
Medical Needs :	NO / YES _				
Allergies:					EPI-PEN: NO / YES
Language/Speech	Difficulties: NO / YES				
Learning Delays/[Difficulties: NO / YES				
Unusual Fears:	NO / YES				
Other Information					
Potty Trained: N		Impulsive: NO / Y		Shy: NO / YES	RIGHT / LEFT Handed
Domineering: N	O / YES Well-Co	oordinated: NO / Y	'ES Ha	appy: NO / YES	
Office Use:	121 Form Received Da	ate	Exn.	On F	mail List

Eme	rgency Contacts (other than parents/	guardians): *must provide at least 2		
1.	Name		Phone		
	City/State		Relationship		
2.	Name		Phone		
	City/State		Relationship		
3.	Name		Phone		
	City/State		Relationship		
4.	Name		Phone		
	Address		Relationship		
Pers	ons Authorized to Pick Up Child (other	er than pa	rents/guardians):		
	ase list legal name as it appears on identif	•	,		
Nam	e		Phone		
Relat	ionship				
			Phone		
Relat	ionship				
			Phone		
Relat	ionship		_		
Siblin	g(s):		Other Name	Age	
N	ame	Age	Name	Age	
Other	Adults Living in Home:		Relationship:		
N	ame		Relationship:		
Previo	ous school(s) attended:				
R	eason for leaving:		Reason for leaving:		
Churc	ch attending:				
W	ould you like more information on Cross				
	·		?		
	ts, please supply a complete response to answer N/A. Please do not leave anythin	•	n on this form. If the item is not applicable,		
	•		5 .		
			Date		
Direct	or Signature		Date		