

Child's Name _____
LAST FIRST MIDDLE Name Called

Please Circle: Male Female Birthdate: _____ Age on 8/31/19: _____

Parents _____

Address _____

Zip _____ Subdivision _____

Preferred Phone Number _____

Email Address _____

Please indicate your 1st and 2nd choice classes. Our birthdate cut-off is August 31, 2019. Toddlers must be 15 months old on or before this date. All other children must be the age of the class for which they are registering by this date. Children who are five by August 31 may register for the Transitional K class. Others may be placed in this class upon discretion of the director. We reserve the right to maintain a reasonable boy/girl ratio in each class. All children in Threes classes must be potty-trained before school begins. Toddlers must be walking when school begins.

A registration fee must accompany this form and the Child Information Form. Use the chart below to determine the amount of your registration fee for your first-choice class. If your child is placed in your second-choice class, we will make an appropriate adjustment to your registration fee.

2 days: \$225 3 days: \$302 4 days: \$353 5 days: \$378

Toddlers:	_____ T/TH		
Twos:	_____ T/TH	_____ M/W/F	
Threes:	_____ M/W/F	_____ M-TH	_____ M-F
Fours:	_____ M - TH	_____ M - F	
Transitional K:	_____ M - F		

Are you members of Saint Andrews Presbyterian Church? _____

How many years has THIS child attended Saint Andrews Preschool? _____

How many SIBLINGS of this child have been at Saint Andrews Preschool? _____

How many total years have this child's siblings been at Saint Andrews Preschool? _____

Check here if you are registering multiple children and you need matching days _____

Names and ages of siblings who are also registering this year:

NAME

AGE/CLASS

NAME

AGE/CLASS

PHOTO RELEASE

From time to time, Saint Andrews Preschool may including photos of students, teachers, and school activities on its website, blog and in publications. Names of children will never be used.

_____ YES I hereby give permission for Saint Andrews Presbyterian Preschool to use photos of my child on the preschool website and other electronic forms of communication.

Parent's Initials: _____

_____ NO I hereby *do not* give permission for Saint Andrews Presbyterian Preschool to use photos of my child on the preschool website and other electronic forms of communication.

Parent's Initials: _____

MOVEMENT EDUCATION CONSENT

I hereby give permission for my child to participate in the Music and Movement Class at Saint Andrews Preschool. I recognize that injuries can occur in any activity which involves motion. In consideration for allowing my child to participate in movement education I release Saint Andrews Preschool and staff from any and all liability for injuries suffered by my child while under the instruction or supervision of Saint Andrews staff and I agree not to sue for any such injury. This acknowledgment of risk and waiver of liability has been read and understood and is signed voluntarily.

Parent's Initials: _____

STUDENT HANDBOOK and SCHOOL POLICIES

Each year we ask families to review our Student Handbook, taking special notice because some things change from year to year. In particular, please review our policies regarding illness and immunizations, tuition and payments, and our inclement weather policy. You can find our handbook posted on the preschool page on the Saint Andrews website: www.sapc.com/preschool/ You may also request a hard copy in the preschool office.

I have read and understand all of the policies of Saint Andrews Preschool outlined in the Student Handbook.

(Parent Signature)

(Date)

Child's Name _____
LAST FIRST MIDDLE Name Called

Parents' Names _____

Occupations _____

Siblings (names and ages) _____

List any medical conditions, serious accidents, allergies, drug sensitivities or operations that we should be aware of:

With whom does your child usually play? How does he/she get along with playmates and siblings?

Does he/she enjoy being alone?

What, if anything, upsets or frightens your child? What comforts your child?

How does your child show feelings?

What methods do you use when he/she behaves in a way that you do not approve of?

What are your child's favorite activities?

What particular ways can we help your child? What are your goals for your child this year?

Please feel free to tell us anything else you want us to know about your child.
