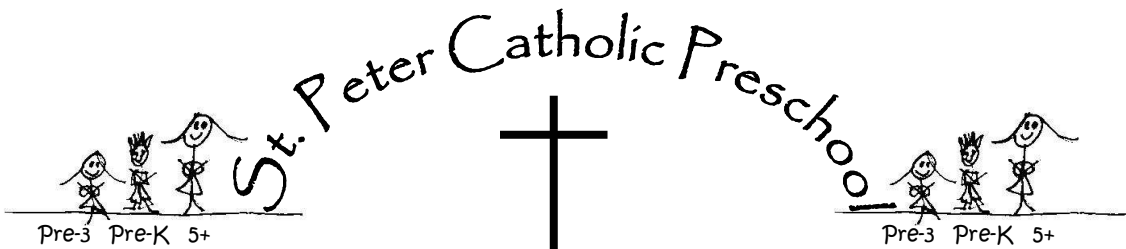


GENERAL



1112 9th ave. Greeley, Co. 80631 (970)346-9777

**5+**

**Pre-k**

**Pre-3**

(Circle one)

Date of Application \_\_\_\_\_

Date of Admission \_\_\_\_\_

Date of Dis-enrollment \_\_\_\_\_

**OFFICE USE ONLY**

Application Complete **Y N**

Registration Fee Paid **Y N**

**Child's Name** \_\_\_\_\_

**Child's Date of Birth** \_\_\_\_\_  
Month/Date/Year

**Address** \_\_\_\_\_  
Street Bldg. #

**Mother's Name:** \_\_\_\_\_ **Cell Phone #** \_\_\_\_\_

**Where Employed:** \_\_\_\_\_ **Work Phone #** \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ **Cell Phone #** \_\_\_\_\_

**Where Employed** \_\_\_\_\_ **Work Phone #** \_\_\_\_\_

If either parent's home phone and /or address is different from child's please list;

\_\_\_\_\_  
Street bldg. # City State Zip

\_\_\_\_\_  
Phone #

**In case of emergency and neither parent/guardian can be reached, responsible contact persons;**

\_\_\_\_\_

\_\_\_\_\_  
Name and Relationship to child Home Phone #

If you would like to receive E-mails from preschool please provide your E-mail address

\_\_\_\_\_

**\$25 registration fee due at time of registration**      **Paid yes/no**

APPLICATION

FORM