

ENROLLMENT FORM

Must be filled out annually.



Child's Name	Gender	Birthdate
Primary address		
Guardian's Name & Relationship	Home #	Cell #
Work Address		Work #
Guardian's Name & Relationship	Home #	Cell #
Work Address		Work #

Please answer the following questions (use reverse side, if necessary):

Sibling names and ages:

Would you be willing to be a Teach Parent for pay (\$40)?

What talents, skills or interests do you have that you are willing to share with the preschool?
(music, carpentry, sewing, crafts, repair, etc.)

Describe your child's previous group experiences.

What are your hopes for your child in this preschool?

Turn this sheet over and write a paragraph that tells the teacher about your child (temperament, likes & dislikes, special interests etc.).

