

Old North Preschool 4201 Stringtown Road Evansville, IN 47711 812-425-7529(Play)

*******REGISTRATION FOR JUMP START PRE-SCHOOL*****2017-2018 School Year**

Child's First and Last Name _____ Phone _____

Address _____ Zip _____ Email _____

Birthdate _____ Sex _____ Potty Trained _____
Mo Day Year

Father's Name _____ Home# _____ CELL # _____

Home Address _____ City _____ State _____ Zip _____ email _____

Place Of Employment _____ Work Phone _____

Mother's Name _____ Home# _____ CELL # _____

Home Address _____ City _____ State _____ Zip _____ email _____

Place Of Employment _____ Work Phone _____

Doctor's Name _____ Phone No. _____

SITTER NAME _____ Phone No. _____

Address _____ City _____ State _____ Zip _____

Other Emergency Information (Name & Phone Of Who To Contact In Case You Cannot Be Reached. More than one appreciated.)

Brothers & Sisters (List Names And Ages)

People Who Are Allowed To Pick Your Child Up At Pre-School (Your Child Cannot Be Released To Someone Who Is Not On This List)

In An Emergency, Your Child Will Be Taken By Ambulance To The Hospital Of Your Choice _____

Church Affiliation _____

The Applicant Agrees To Remit A Deposit Of \$50.00 That Will Be the activity fee for the 2017-2018 school year. The Deposit Is Not Refundable After June 1, 2017 If The Child Is Withdrawn. Tuition Is \$95.00 Per Month. It will be deducted from a checking account or savings account on the 1st of each month or can be charged to a credit card for an additional \$3.00 fee. The \$50.00 Deposit And The Registration Form Are Due By April 20, 2017.

Mother's Signature _____

Father's Signature _____

Return This Registration Form Along With The \$50.00 Deposit By April 20, 2017 And Your Child Will Be Officially Enrolled In Old North Pre-School

Office Use Only: Check No. _____ Date Returned _____ T-shirt _____