

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

**\*\*\*\*\*REGISTRATION FOR PRE-SCHOOL\*\*\*\*\*2019-2020 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 2019-2020 school year. The deposit is **Not Refundable after June 1, 2019 if the child is withdrawn.** Tuition Is \$145.00 Per Month. It will be deducted from a checking account or savings account on the 1<sup>st</sup> 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 18, 2019.**

Mother's Signature \_\_\_\_\_

Father's Signature \_\_\_\_\_

**If You Return This Registration Form Along With The \$50.00 Deposit By April 18, 2019, Your Child Will Be Officially Enrolled In Old North Pre-School.**

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