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

## \*\*\*\*\*REGISTRATION FOR JUMP START PRE-SCHOOL\*\*\*\*\*2023-2024 School Year

Child's First and Last Name		Phone			
Address					
ruuress		<i>E</i> ip	Dn thuate		
Email		Sex_	Potty Trained_		
Father's Name		Home#	CEL	.L #	
Home					
Address	City	StateZip_	email		
Place Of Employment		Work Phone			
Mother's Name		Home#	CFI	I.#	
Home		110IIIC# _	CE1	<i>π</i>	
	City	State 7in	omoil		
Address	Cny	StateZip	етап		
Place Of Employment			Work Ph	one	
Doctor's Name			Phone No	),	
SITTER					
		Phone No			
IVAIVIE	1 none 140	<del></del>			
Address		City	State	Zip	
Brothers & Sisters (List Name	es And Ages)				
People Who Are Allowed To Pick	Your Child Up At Pre-Scl	nool (Your Child Cannot	Be Released To Someone	Who Is Not On This List)	
In An Emergency, Your Child	·	_			
The Applicant Agrees To Remit A De <u>2023. If The Child Is Withdrawn.</u> To can be charged to a credit card for an	iition Is \$120.00 Per Month. It	will be deducted from a cl	necking account or savings	account on the 1st of each month or	
Mother's Signature					
Father's Signature					
Return This Registration Form In Old North Pre-School				d Will Be Officially Enrolled	
Office Use Only: Check No	Date Returned		Γ-shirt		