



# Enrollment Form

\_\_\_\_\_ **First Name**

\_\_\_\_\_ **Full Middle Name**

\_\_\_\_\_ **Last Name**

What child likes to be called \_\_\_\_\_

**Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Age When School Begins** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Apt. #** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone#** \_\_\_\_\_

## Family Information

**Parents are:** \_\_\_\_ *Married* \_\_\_\_ *Separated* \_\_\_\_ *Divorced*

**Custody of the child is with:** \_\_\_\_\_

(if not both parents, court document must be attached)

**Father's Name** \_\_\_\_\_

**Father's Employer** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Apt.** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone #** \_\_\_\_\_

**Business Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_

**E-Mail** \_\_\_\_\_

**Mother's Name** \_\_\_\_\_

**Mother's Employer** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Apt.** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone #** \_\_\_\_\_

**Business Phone** \_\_\_\_\_

**Cell Phone #** \_\_\_\_\_

**E-Mail** \_\_\_\_\_

### Other children in the family

**Name :** \_\_\_\_\_ **Age :** \_\_\_\_\_

**Name :** \_\_\_\_\_ **Age :** \_\_\_\_\_

**Name :** \_\_\_\_\_ **Age :** \_\_\_\_\_

**Allergies** \_\_\_\_\_

**Previous Preschool Experience** \_\_\_\_\_

**Church Affiliation** \_\_\_\_\_ **If so what church** \_\_\_\_\_