

Community Preschool 2019-20 Registration

Class: _____

Child's Name _____

Child's Birth Date _____ Gender: Male Female

Address _____

City _____ Zip _____

Program Information

Check the days you are enrolling for: Monday Wednesday Thursday

Please Note: Pre-Kindergarten is a 3-days a week program.
Due to the limited space, no class or teacher may be requested.

Parent Information

Mother's Name _____ Father's Name _____

Home Phone (_____) _____ Home Phone (_____) _____

Cell Phone (_____) _____ Cell Phone (_____) _____

E-mail address _____ E-mail address _____

Who does the child live with? Mother Father Both Other _____

Medical & Emergency Information

Child's Physician _____ Phone (_____) _____

Allergies or Medical Conditions: _____

Other than Parents:

Emergency Contact _____ Contact Phone (_____) _____

Emergency Contact _____ Contact Phone (_____) _____

Do you attend church regularly? Yes No If yes, Where? _____

How did you hear about our Community Preschool? _____

Permission for Treatment, Photography and Release:

My permission is granted for the Weekday Director, or other staff person in charge to obtain necessary medical attention in case of sickness or injury to my child. I also give permission to the hospital selected by the person in charge to treat my child with any needed emergency care. I give my consent for photographs or videos of my child to be used in First Baptist Church, Broken Arrow publications and/or public exhibits. I further agree not to hold First Baptist Church, Broken Arrow, Oklahoma, or any of the accompanying sponsors liable for any accident or injury incurred by my child while in their care.

Parent Signature _____ Date _____

Office Use Only: Registration \$ _____ Monthly Tuition \$ _____

People allowed to pick up my child:

Name _____ Relationship _____

Home Number (_____) _____ Cell Number (_____) _____

Name _____ Relationship _____

Home Number (_____) _____ Cell Number (_____) _____

Name _____ Relationship _____

Home Number (_____) _____ Cell Number (_____) _____

Please Note: The people listed above will need to check in at the Community Preschool office and show a picture ID before they pick up your child.